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(Re	equestor's Name)		
(Ac	ddress)		
(Ac	ddress)		
(C)	ty/State/Zip/Phone #)		
PICK-UP	☐ WAIT ☐ MAIL		
(Business Entity Name)			
(Do	ocument Number)		
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer:			
Office Use Only			



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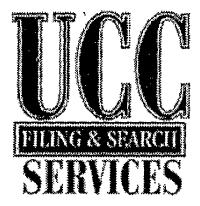
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SECRETARY OF STATE

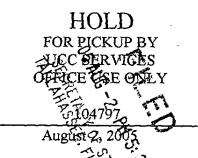
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MISSE DE COLFORATION



UCC FILING & SEARCH SERVICES, INC. 526 East Park Avenue
Tallahassee, Florida 32301
(850) 681-6528



CORPORATION NAME (S) AND DOCUMENT NEXT BER (S)

MDR Queensmark LLC

THIST QUOTISHAIN DEC					
	Filing Evidence □ Plain/Confirmation Copy	Type of Document ☐ Certificate of Status			
☑ Certified Copy - 2		□ Certificate of Good Standing - 2			
		□ Articles Only			
	Retrieval Request Photocopy	 □ All Charter Documents to Include Articles & Amendments □ Fictitious Name Certificate 			
	☐ Certified Copy	□ Other			
	NEW FILINGS	AMENDMENTS			
	Profit	Amendment			
	Non Profit	Resignation of RA Officer/Director			
X	Limited Liability	Change of Registered Agent			
	Domestication	Dissolution/Withdrawal			
	Other	Merger			
OTHER FILINGS		REGISTRATION/QUALIFICATION			
	Annual Reports Foreign				
	Fictitious Name	Limited Liability			
	Name Reservation	Reinstatement			
	Reinstatement	Trademark			
		Other			

TV COMPANY ?

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMP

ARTICLE I - Name: The name of the Limited Liability Company is:	
MDR Queensmark LLC	

ARTICLE II - Address:

Principal Office Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address:

c/o Michael D. Rubin	c/o Michael D. Rubin
5454 Wisconsin Avenue, #1265	5454 Wisconsin Avenue, # 1265
Chevy Chase, MD 20815	Chevy Chase, MD 20815

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

NRAI Services, Inc.				
Name				
2731 Executive Park Drive, Suite 4				
	Florida street address (P.O. Box NOT acceptable)			
Weston	FL 33331			
<u></u>	City, State, and Zip			

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

TRUE:	Name and Address:			
"MGR" = Manager				
"MGRM" = Managing Member				
Manager	Michael D. Rubin			
	5454 Wisconsin Avenue, # 1265			
	Chevy Chase, MD 20815			
	,			
(Use attachment if necessary)				
NOTE: An additional article must be	added if an effective date is requested.			
WAS CALLED MAN CACCAL Y MINISTER AN				
REQUIRED SIGNATURE:				
	(10,01/			
51 (N 4111)				
Signature of a marrhan h	r an authorized representative of a member.			
Signature of a member of	an authorized representative or a member.			
	(In accordance with section 608.408(3), Florida Statutes, the execution			
of this document constitute that the facts stated here	es an affirmation under the penalties of perjury			
_1				
	ephen H. Ellick			
Typed	or printed name of signee			

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)