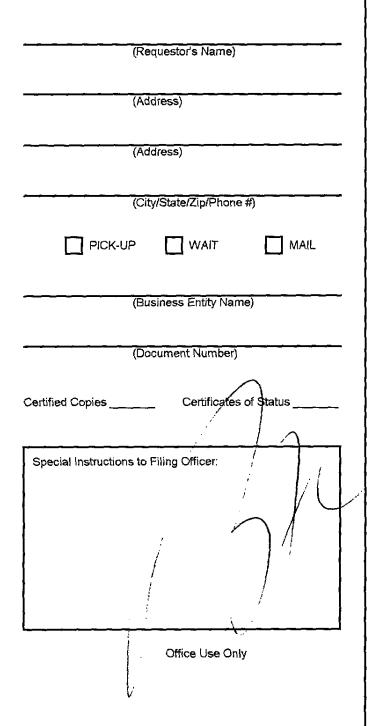
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UCC Filing & Search Services, Inc.

1574 Village Square Boulevard, Suite 100 Tallahassee, Florida 32309 (850) 681-6528

HOLD FOR PICKUP BY **UCC SERVICES** OFFICE USE ONLY

October 18, 2005

J	ENVIOLES	CORPORATION NAME (S) AND DOCUMENT NUMBER (S):
S.LL	С	
	Filing Evidence □ Plain/Confirmation Copy	Type of Document Certificate of Status Certificate of Good Standing Articles Only All Charter Documents to Include Articles & Amendments
	⊠ Certified Copy	□ Certificate of Good Standing
		□ Articles Only
		☐ All Charter Documents to Judg
	Retrieval Request Photocopy	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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

S.LLC

ARTICLE II - Address:

SOCI 18 PATION The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

c/o Steve Rifkind 6221 Island Walk D Boca Raton, Florida 33496 Same as principal office address

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 Dr., Suite 4 Florida street address (P.O. Box NOT acceptable)

> Weston, FL 33331 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 egistered agent as provided for in Chapter 608, F.S.

(CONTINUED)

Name and Address:		
Steve Rifkind 6221 Island Walk D Boca Raton, Florida 33496		
Doca Natoli, i fortua 55470		
Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury		
RIFKIND ed name of signee		

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