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Florida Department of State  
Division of Corporations  
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## To:

Division of Corporations  
Fax Number : (850) 922-4003

## From:

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 541-3694  
Fax Number : (305) 541-3770

## LIMITED LIABILITY COMPANY

ARNAGE, L.L.C.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

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(1)

This instrument was prepared by:  
David M. Goldstein, Esq.  
200 S. Biscayne Boulevard  
Suite 1880  
Miami, Florida 33131

HO 1000010711

**ARTICLES OF ORGANIZATION FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I**

The name of the Limited Liability Company is: **ARNAGE, LLC.**

**ARTICLE II**

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

c/o David M. Goldstein, Esq.  
200 S. Biscayne Boulevard, Suite 1880  
Miami, Florida 33131

**ARTICLE III**

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

David M. Goldstein, Esq.  
200 S. Biscayne Boulevard, Suite 1880  
Miami, Florida 33131

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  
familiar with and accept the obligations of my position as registered agent as provided for in  
Chapter 608, F.S.

  
Registered Agent's Signature

HO 1000010711

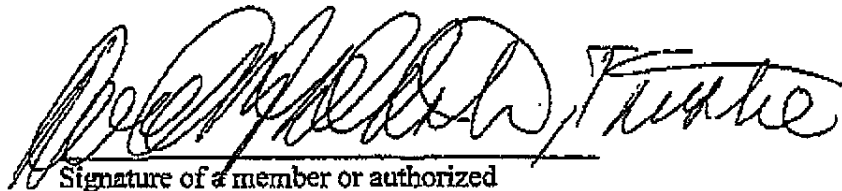
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ARTICLE IV

The Limited Liability Company is to be managed by one or more managers and is therefore, a managed company by the following individual(s):

Jean Noel Grinda, Manager



Signature of a member or authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this Affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

STATE OF FLORIDA  
COUNTY OF MIAMI-DADE

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TALLAHASSEE, FLORIDA

The foregoing instrument was acknowledged before me this \_\_\_\_ day of January, 2001, by

\_\_\_\_\_, who is personally known to me.

\_\_\_\_\_  
NOTARY PUBLIC, State of Florida

My Commission expires:

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HO 1000010 / 11

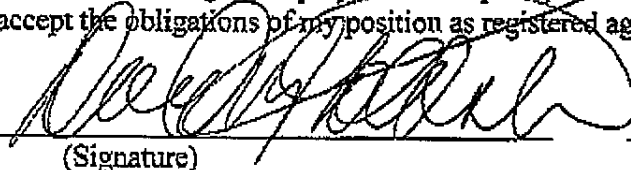
**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: **ARNAGE, LLC.**
2. The name and address of the registered agent and office is:

**DAVID M. GOLDSTEIN, ESQUIRE  
200 S. BISCAYNE BOULEVARD, SUITE 1880  
MIAMI, FLORIDA 33131**

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.



(Signature)

(Date)

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TALLAHASSEE, FLORIDA

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