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1480 Euclid Avenue • Suite 303 • Miami Beach • FL • 33139 • Phone: +1 305 673 3756 • Fax: +1 305 674 6513

14 April 2001

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee
FL 32314

To whom it may concern:

ARTICLES OF ORGANIZATION: E-QUIP INTERNATIONAL LLC

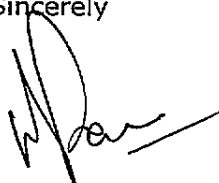
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Attached please find the Articles of Organization for E-Quip International LLC. In accordance with submission instructions, details you require are:

Name: Donald Paige
Address: 1480 Euclid Ave, #303
Miami Beach
FL 33139
Day Phone: (305) 673-3756

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****125.00 ****125.00

Sincerely



Donald Paige
Director

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

E-QUIP INTERNATIONAL LLC

ARTICLE II - Address:

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

Mailing & street address: 1480 EUCLID AVE, #303
MIAMI BEACH
FL, 33139

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

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

DONALD PAIGE
Name
1480 EUCLID AVE, #303
Florida street address (P.O. Box **NOT** acceptable)
MIAMI BEACH FL 33139
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..

[Signature]
Registered Agent's Signature

Article IV - Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

[Signature]
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 that the facts stated herein are true.)

DONALD CLIVE PAIGE
Typed or printed name of signee

Filing Fees:

- ✓ \$100.00 Filing Fee for Articles of Organization
- ✓ \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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