# L0100001060

ACCOUNT NO. : 072100000032

REFERENCE: 201254

AUTHORIZATION :

COST LIMIT :

ORDER DATE: June 26, 2001

ORDER TIME : 10:17 AM

ORDER NO. : 201254-001

100004451991--5

CUSTOMER NO: 7276812

CUSTOMER: Ms. Carol A. Laughlin

Ms. Carol A. Laughlin

8660 Sw 212st. #303

Miami, FL 33189

#### DOMESTIC FILING

NAME: PIXELSOAP LLC

#### EFFECTIVE DATE:

XX \_\_\_ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Norma Hull - EXT. 1115

EXAMINER'S INITIALS:

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Δ	RT	CT	Æ.	Ϊ.	Na	me:

The name of the Limited Liability Company is:

PIXELSOAP LLC

#### **ARTICLE II - Address:**

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

8660 S.W. 212 STREET, #303, MIAMI, FLORIDA 33189

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

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

	SIMO	) NC	JRBINA		
		Nan	ne		
8660	s.w. 2	212	STREET,	#303	
Florida street	address (	P.O	Box NOT	acceptable)	
MIAMI,			FL	33189	
	City, S	State	, and Zip	<i>=</i> "	

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.. SIMON URBINA

> By: see attached 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 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.) LAURA R. DUNLAP 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)

# ACCEPTANCE OF REGISTERED AGENT DESIGNATED IN THE ARTICLES OF ORGANIZATION

Simon Urbina, an individual residing in this state, having a business office identical with the registered office of the company named below, and having been designated as the Registered Agent in the above and foregoing Articles of Organization of:

#### FIXELSOAP LLC

Simon Urbina is familiar with and accepts the obligations of the position of Registered Agent under Section 608, Florida Statutes.

Typed Name: Simon Urbina

SECRETARY OF STATE FALLAHASSEE, FI MRINA

FILED

### MEMBERS OF:

# PIXELSOAP LLC

Simon R. Urbina Member

8660 S.W. 212 Street, #303 Miami, Florida 33189

Carol Laughlin Member

same as above

Alex Urbina Member same as above

SECRETARY OF STATE

#### LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of PIXELSOAP LLC (the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

This Limited Power of Attorney is executed on this

WITNÉSS:

Signature

Print Name of Witness

day of 6/28,2001

Signatura

Simon K // Rhma

Signature

WIINESS

Print Name of Witness

ECRETARY OF STAT

PLILE D-LIMITED FOWER OF ATTORNEY 04/00 (FLILEATT)

AND FILED