101000021006

name:

A. Mikaela Fountaine

address:

10732 SW 188th Street

Miami, FL 33157

daytime telephone:

305-259-6767

600004700626---1 -11/30/01--01062--011 ****125.00 *****125.00

SECRETARY OF STATE OF VISION OF CORPORATIONS

OI NOV 30 AM 8: 28

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ARTÍCLES OF ÖRGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

mayhem, Ilc

ARTICLE II - Address:

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

pob 700897 Miami, FL

33170

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

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

Anastasia N	Mikaela Fountaine	
	Name	
	W 188th Street	
	(P.O. Box <u>NOT</u> acceptable)	
	i FL 33157	
City, S	State, and Zip	
Having been named as registered agent and to accept seliability company at the place designated in this certificate registered agent and agree to act in this capacity. I furth statutes relating to the proper and complete performance accept the obligations of my position as registered agent. Registered	ate, I hereby accept the appointment as her agree to comply with the provisions of all se of my duties, and I am familiar with and	
Article IV - Management (Check box if applicable) The Limited Liability Company is to be manage therefore, a manager - managed company.	le.) ed by one manager or more managers and is,	
Signature of a member of an au (In accordance with section 608.4 of this document constitutes an affirthat the facts sta	dided if an effective date is requested) thorized representative of a member. 408(3), Florida Statutes, the execution firmation under the penalties of perjury ated herein are true.) by Lange ted name of signee	SECRETARY OF STATE DIVISION OF CORPORATIONS
Typed or print	ted name of signee	