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To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : SHAPIRO & ADAMS, P.A.

Account Number: Il9990000101 Phone: (561)691-0059 Fax Number: (561)691-0066

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LIMITED LIABILITY COMPANY

IKE Enterprises, LLC

Certificate of Status	0
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I . Name:

The name of the Limited Liability Company is: IKE Enterprises, LLC

ARTICLE II- Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 5840 Corporate Way, Suite 106A, West Palm Beach, Florida 33407.

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

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

Stephen Lovas 5840 Corporate Way Suite 106A West Palm Boach, Florida 33407

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

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Article IV . Management (Check 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.)

Stephen Lovas, Member Typed or printed name of signee

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