

**Electronic Articles of Organization
For
Florida Limited Liability Company**

**L03000030380
FILED 8:00 AM
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Sec. Of State**

Article I

The name of the Limited Liability Company is:

LOSTOPIA, L.L.C.

Article II

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

P.O. BOX 610755
NORTH MIAMI, FL. US 33261

The mailing address of the Limited Liability Company is:

P.O. BOX 610755
NORTH MIAMI, FL. US 33261

Article III

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

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

MARTIN SISKIND
2200 NW 2ND AVENUE
MIAMI, FL. 33127

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.

Registered Agent Signature: MARTIN SISKIND

Signature of member or an authorized representative of a member

Signature: MARTIN SISKIND