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To:

Division of Corporations

Fax Number : (850)205-0383

From: GAIL S. ANDRE

Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.

Account Number : 072720000036 Phone : (407)843-4600 Fax Number : (407)843-4444

PLEASE ARRANGE FILING OF THE ATTACHED ARTICLES OF ORGANIZATION AND RETURN A CERTIFICATION TO ME AS SOON AS POSSIBLE. THANK YOU FOR YOUR ASSISTANCE IN TRIS MATTER.

# LIMITED LIABILITY COMPANY

CONFETTI QUEEN, LLC

Certificate of Status	0
Certified Copy	1
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#### ARTICLES OF ORGANIZATION

OF

#### CONFETTI QUEEN, LLC

## ARTICLE I - NAME

The name of this limited liability company is CONFETTI QUEEN, LLC (the "Company").

### ARTICLE II - PRINCIPAL OFFICE

The mailing address of the Company is 12472 Lake Underhill Rd #323, Orlando, Florida 32828, and the street address of the principal office of the Company is 2358 Cypress Trace Circle, Orlando, Florida 32825.

#### ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 2358 Cypress Trace Circle, Orlando, Florida 32825, and the name of the initial registered agent of the Company at that address is Sheree L. Sunkin.

Signature of a Member or an Authorized Representative of a Member

Sheree L. Sunkin

Typed or Printed Name of Signer

## ACCEPTANCE OF REGISTERED AGENT

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, Florida Statutes.

Sheree L. Sunkin