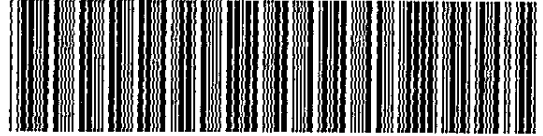


L03 0000 51991

(Requestor's Name)

(Address)



600025033936

Under's  
Name

F. Woodruff

Phone 305 267-0255

Company

COMPUTER TAX AND ACCOUNTING

Address

1900 SW 57TH AVE # 2

Dept./Floor/Suite/Room

City MIAMI

State

FL

ZIP

33155-2154

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

*[Handwritten signature]*

EFFECTIVE DATE

12-3-03

12/05/03--01006--009 \*\*125.00

SECRETARY OF REVENUE  
TALLAHASSEE, FLORIDA

03 DEC -4 PM 3:07

FILED

FILED

03 DEC -4 PM 3:07

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION

SHOP BERTA, LLC

A LIMITED LIABILITY COMPANY

(Pursuant to Chapter 608, Florida Statutes)

EFFECTIVE DATE

12-3-08

1. **Name.** The name of the limited liability company is SHOP BERTA, LLC.
2. **Purpose.** The purpose of this limited liability company may include the transaction of any and all lawful business for which limited liability companies may be organized in the state of Florida.
3. **Address of Principal Office.** The street address of the principal office of the limited liability company is:  
  
1900 SW 57 AVENUE - SUTTE 2, MIAMI, FL 33155
4. **Mailing Address.** The mailing address of the limited liability company is:  
  
1900 SW 57 AVENUE - SUTTE 2, MAIMI, FL 33155
5. **Members at Time of Formation.** There will be at least one member at the time the limited liability company is formed.
6. **Period of Duration.** The period of duration shall be perpetual.
7. **Management.** Management of the Limited Liability Company at the time of formation is reserved for the initial member(s).
9. **Registered Agent, Registered Office, and Registered Agents Signature.** The name and the Florida Street address of the registered agent are::

ROY F. WOODRUFF  
1900 SW 57 AVENUE - SUITE 2  
MIAMI, FL 33155

*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.

  
\_\_\_\_\_  
ROY F. WOODRUFF

8. **Effective Date.** The effective date of the limited liability company shall be:

12/3/03

  
\_\_\_\_\_  
JONATHAN ROSS  
Member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true and correct.)

**FILED**  
03 DEC -4 PM 3:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA