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P.01/03

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LIMITED LIABILITY COMPANY

Ssorgsoft LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

DIVISION OF CORPORATION

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P.02/03

FAX AUDIT # 1050002748120

**ARTICLES OF ORGANIZATION
OF
Ssorgsoft LLC**

ARTICLE I NAME

The name of the limited liability company shall be: **Ssorgsoft LLC**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 1417 Abberton Dr., Orlando, Florida 32837.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: David Gross, 1417 Abberton Dr., Orlando, Florida 32837. Located in the County of Orange.

ARTICLE IV DURATION


The duration for the limited liability company shall be: 12/31/2043.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the names and addresses of the members of the Limited Liability Company are:

Elhassania Gross, 1417 Abberton Dr., Orlando, Florida 32877

David Gross, 1417 Abberton Dr., Orlando, Florida 32837


Business Filings Incorporated, Organizer

Mark Schiff, AVP

Authorized Representative

Prepared by Mark Schiff, Business Filings Incorporated, 8025 Excelsior Dr. Suite 200,
Madison, WI 53717

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P.03/03

CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES,
THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE
STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN
DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE
STATE OF FLORIDA.

The name of the limited liability company is: **Ssorgsoft LLC**

The name and address of the registered agent and office is David Gross, 1417 Abberton
Dr., Orlando, Florida 32837. Located in the County of Orange.

Having been named as registered agent and to accept service of process for the above
stated 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.

Signature:

David Gross
David Gross

Date: December 11, 2003

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TALLAHASSEE, FLORIDA

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TOTAL P.03