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Fax Number : (850) 205-0383
From: *Paul A. Senterfitt, Legal Asst*
Account Name : AKERMAN, SENTERFITT & EIDSON, P.A.
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LIMITED LIABILITY COMPANY

A LASER SOLUTION, LLC

Certificate of Status	0
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**ARTICLES OF ORGANIZATION
OF
A LASER SOLUTION, LLC**

ARTICLE I: - Name:

The name of the Limited Liability Company is: **A LASER SOLUTION, LLC.**

ARTICLE II: - Address:

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

5901 190th Court North
Jupiter, Florida 33458

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

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

American Information Services, Inc.
One Southeast Third Avenue, 27th Floor
Miami, Florida 33131

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.

American Information Services, Inc.
By: *[Signature]*
Nery C. Toledo, Assistant Secretary
Registered Agent

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ARTICLE IV: - Management:

The Limited Liability Company is to be a manager-managed company, managed by one or more managers.

[Signature]
David I. Beckett, Esq.
Authorized Representative of a Member

Signed and dated this 24 day of June, 2004.

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