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Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : I20010000247
Phone : (800) 494-3124
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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

MGM LLC

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TALLAHASSEE, FL

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

MGM LLC

ARTICLE II ADDRESS

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

2145 Malibu Lakes Circle Apt 1816

Naples, FL 34119

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT SIGNATURE

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

A1A REGISTERED AGENT INC.

92 SADBERRY RD.

QUINCY, FL 32351

Having been named as registered agent 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..

Paul Smith Paul Smith V.P.

Registered Agent's Signature

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or managers and is, therefore, a Member Managed Company.

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ARTICLE V MEMBERS (optional)

Managing Member:

Mike Hamilton

2145 Malibu Lakes Circle Apt 1816

Naples Florida 34119

Managing Member:

Gregg Laufer

1203 Lastrada Lane

Naples Florida 34103

Managing Member:

Mike Skiera

17531 Boat Club Drive

Fort Myers Florida 33908



Signature of a member or an authorized representative of a member.

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

NAME OF SIGNER

Typed or printed name of signee

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TALLAHASSEE, FLORIDA

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