

**Electronic Articles of Organization
For
Florida Limited Liability Company**

**L04000087939
FILED 8:00 AM
December 07, 2004
Sec. Of State
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Article I

The name of the Limited Liability Company is:
SHAPE SHIFT, LLC

Article II

The street address of the principal office of the Limited Liability Company is:
16089 OKEECHOBEE BLVD
LOXAHATCHEE, FL. US 33470

The mailing address of the Limited Liability Company is:
16089 OKEECHOBEE BLVD
LOXAHATCHEE, FL. US 33470

Article III

The purpose for which this Limited Liability Company is organized is:
ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:
NESTOR M MARCHANTE
16089 OKEECHOBEE BLVD
LOXAHATCHEE, FL. 33470

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.

Registered Agent Signature: NESTOR MARCHANTE

Article V

The name and address of managing members/managers are:

Title: MGR
NESTOR M MARCHANTE
16089 OKEECHOBEE BLVD
LOXAHATCHEE, FL. 33470 US

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Signature of member or an authorized representative of a member

Signature: NESTOR MARCHANTE