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LIMITED LIABILITY COMPANY

ZERO ONE GROUP, LLC

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ARTICLES OF ORGANIZATION OF ZERO ONE GROUP, LLC  
LIMITED LIABILITY COMPANY

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I — Name:

The name of the Limited Liability Company is: ZERO ONE GROUP, LLC

ARTICLE II — Address:

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

7220 NW 36<sup>th</sup> STREET, SUITE 540, MIAMI, FLORIDA 33166

ARTICLE III — Duration:

The period of duration for the Limited Liability Company shall be: Perpetual

ARTICLE IV — Management:

(Check the appropriate box and complete the statement)

- ☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:
- ☐ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing members are:

ESPERANTO INC. dba MARKETLOGIC  
7220 NW 36<sup>th</sup> STREET, SUITE 540, MIAMI, FLORIDA 33166

ARTICLE V — Admission of Additional Members:

The right of the members to admit additional members and the terms and conditions of the admissions shall be by unanimous consent of the Members.

  
DAVID F. ROBERTS

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES,  
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING  
STATEMENT IN DESIGNATING THE REGISTERED AGENT, IN THE STATE OF FLORIDA

1. The name of the limited liability Company is: ZERO ONE GROUP, L.L.C
2. The name and address of the registered agent and Office is:

DAVID F. ROBERTS  
1401 BRICKELL AVE, SUITE 500  
MIAMI, FL 33131

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the designated place 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)

12/15/04  
(DATE)

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