

FROM : CLARION VENTURES, INC.

FAX NO. : 623 465 8640

Apr. 03 2005 05:30PM P2

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Florida Department of State
Division of Corporations
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(((H05000087190 3)))

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To:

Division of Corporations
Fax Number : (850) 205-0393

From:

Account Name : CLARION VENTURES, INC.
Account Number : 120030000026
Phone : (623) 465-8636
Fax Number : (623) 465-8640

LIMITED LIABILITY COMPANY

iHero Entertainment LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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DIVISION OF CORPORATION

05 APR 25 PM 3:32

RECEIVED

TALLAHASSEE, FLORIDA

05 APR 25 AM 10:24

Fax Audit Number (((H05000087190 3)))

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

Hero Entertainment LLC**ARTICLE II - Address:**

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

Principal Office Address:2403 NW 27th AvenueBoynton Beach, FL 33436**Mailing Address:**2403 NW 27th AvenueBoynton Beach, FL 33436**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Frank Fradella

Name

2403 NW 27th AvenueFlorida street address (P.O. Box **NOT** acceptable)Boynton BeachFLORIDA 33436

City, State, and Zip

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, Florida Statutes..


Registered Agent's Signature

Fax Audit Number (((H05000087190 3)))

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:**"MGR" = Manager****"MGRM" = Managing Member****Name and Address:**MGRFrank Fradella2403 NW 27th AvenueBoynton Beach, FL 33436MGRMSean Taylor170 Huntington CircleAlpharetta, GA 30004MGRMTom Waltz4224 Campus Point CourtSan Diego, CA 92121MGRMMatt Hiebert123 ForrestwayCamdenton, MO 65020

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.**REQUIRED SIGNATURE:**
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.)

FRANK FRADILLA

Typed or printed name of signee

Filing Fees:**\$100.00 Filing Fee for Articles of Organization****\$ 25.00 Designation of Registered Agent****\$ 30.00 Certified Copy (Optional)****\$ 5.00 Certificate of Status (Optional)**05 APR 25 AM 10:24
STATE
TALLAHASSEE, FLORIDA