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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number: 120010000247
Phone: (800)494-3124

Fax Number : (305)675-2811

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## LIMITED LIABILITY COMPANY

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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:

IFOMA INTERNATIONAL: IFOMAVIRTUOUSRECORDS LLC

## ARTICLE II ADDRESS

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

P.O.BOX 9494 TREASURE ISLAND, FL 33740

## ARTICLE III REGISTERED AGENT. REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

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 all statutes relating to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

A1A REGISTERED AGENT INC. / Registered Agent's Signature

### ARTICLE IV MANAGEMENT

The Limited Liability Company will be managed by one or more managing members and is, therefore, a Member Managed Company.

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#### IFOMA INTERNATIONAL: IFOMAVIRTUOUSRECORDS LLC PAGE 2

## ARTICLE V

The name(s) and address(es) of the managing members of the LLC are:

IFOMA IDIUKU

Managing Member: P. O. BOX 9494

TREASURE ISLAND, FLORIDA 33740

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.)

IFOMA IDIUKU

Typed or printed name of signee

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