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**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. AMS PRODUCTS LLC  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
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**NEW FILINGS**

- ☐ Profit  
☐ Not for Profit  
☒ Limited Liability  
☐ Domestication  
☐ Other

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

**Examiner's Initials**

**ARTICLES OF ORGANIZATION**

**OF**

**AMS PRODUCTS LLC**

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TALLAHASSEE, FLORIDA

**ARTICLE I - NAME**

The name of this limited liability company is **AMS PRODUCTS LLC** (hereinafter "the Company")

**ARTICLE II - ADDRESS**

The mailing address and principal office is :

**2701 South Bayshore Dr., Suite 402  
Miami, Florida 33133**

**ARTICLE III : INITIAL REGISTERED OFFICE AND AGENT**

The name and mailing address of the initial registered office and the initial registered agent of the Company is :

**Stephane Abeger  
2701 South Bayshore Dr., Suite 402  
Miami, Florida 33133**

Having been named as registered agent and to accept service of process for the above state 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.

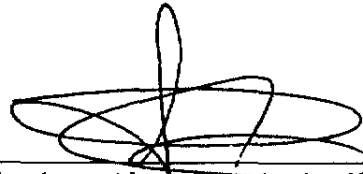
  
Stephane Abeger - Registered Agent

#### **ARTICLES IV - MANAGEMENT**

The Company will be managed by one (1) manager and is, therefore a manager-managed company.

**Stephane Abeger**  
**2701 South Bayshore Dr., Suite 402**  
**Miami, Florida 33133**

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

A handwritten signature in black ink, consisting of several loops and a vertical stroke, positioned above a horizontal line.

Stephane Abeger, Authorized Representative

**ORGANIZER**


IN WITNESS WHEREOF, I have made and subscribed these Articles of Organization  
this 16<sup>th</sup> day of May 2005

  
MARCELLE POIRIER

STATE OF FLORIDA     )  
                                  ) SS  
COUNTY OF DADE     )

I HEREBY CERTIFY that on this day, personally appeared before me **MARCELLE POIRIER** who is well known to me to be the person described in and who executed these Articles of Organization as Organizer, and acknowledged before me that he executed the same freely and voluntarily for the purposes therein expressed.

SWORN TO AND SUBSCRIBED before me this 16<sup>th</sup> of  
May 2005.

  
NOTARY PUBLIC  
State of Florida at large

My commission expires :



Scott M Sandler  
My Commission DD041528  
Expires August 22, 2005