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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

Phone : (305)634-3694

Fax Number : (305)633-9696

LIMITED LIABILITY COMPANY

masterpiece rentals, lic

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 20, 2005

EMPIRE

SUBJECT: MASTERPIECE RENTALS, LLC

REF: W05000034553

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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Michelle Hodges Document Specialist PAX Aud. #: H05000173736 Letter Number: 305A00047535

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Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

05 JUL 20 PM 3:





ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I Name:

The name of the Limited Liability Company is: Masterpiece Rentals, LLC

ARTICLE II Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 3531 Griffin Road
Ft. Lauderdale, FL 33312

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Name

Name

A531 Giffin Road

Florido Street address (P.O. Box NOT geosplable)

Ft. Lauderdello, Ft. 33312

City, State, and 7ip

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 in Chapter 608, Fighida, Statutes.

Redistance Agent Signatura

Facob Mittan

Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager -managed company.

(An additional article must be added if an effective date is requested)

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.)

Typed or printed name of signee

This instrument prepared by: Max M. Hagen, Esquire Florida Bar No.: 032722

Hagen & Hagen, P.A. 3531 Griffin Road Ft. Lauderdale, Florida 33312

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