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Florida Department of State  
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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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**LIMITED LIABILITY COMPANY**

**black bear, l.l.c.**

Certificate of Status	0
Certified Copy	1
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ARTICLES OF ORGANIZATION FOR  
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I

Name

The name of the Limited Liability Company is:

BLACK BEAR, L.L.C.

ARTICLE II

Address

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

16375 NE 18 Avenue, # 225  
North Miami Beach, FL 33162

ARTICLE III

Registered Agent, Registered Office & Registered Agent's Signature

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


Ira R. Shapiro  
16375 NE 18<sup>th</sup> Avenue, #225  
North Miami Beach, FL 33162

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*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.*

  
Ira R. Shapiro, Registered Agent

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ARTICLE IV  
Management

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company. The names of the managers are as follows:

PIERCARLO RICOTTI  
16375 NE 18 Avenue, # 225  
North Miami Beach, FL 33162

PAOLO PIETRASANTA  
16375 NE 18 Avenue, # 225  
North Miami Beach, FL 33162

  
PIERCARLO RICOTTI, Manager

  
PAOLO PIETRASANTA, Manager

*(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.)*

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