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To:
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From:
Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

EFFECTIVE DATE

11/16/05

LIMITED LIABILITY COMPANY

elinvest, llc

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ARTICLES OF ORGANIZATION
OF
ELINVEST, LLC

FILED
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLE I - NAME

The name of the Limited Liability Company is ELINVEST, LLC (the "Company").

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Company is: 2730 S.W. 3rd Avenue, Suite 800, Miami, Florida 33129.

ARTICLE III - DURATION

The period of duration for the Company shall be perpetual.

ARTICLE IV - MANAGEMENT

The Company will be a manager-managed Company.

EFFECTIVE DATE
11/16/05

ARTICLE V - EFFECTIVE DATE

The effective date of formation of the Company is November 16, 2005.

IN WITNESS WHEREOF, the undersigned representative of the Members has executed these Articles of Organization this November 16, 2005.


Norman S. Weider, Esq.

Preparer:
Norman S. Weider, Esq.
100 S.E. 2d Street, #3950
Miami, FL 33131
Phone: (305) 371-6338 - Florida Bar No. 150388

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: **ELINVEST, LLC.**
2. The name and address of the registered agent and office is:

Norman S. Weider, Esq.
100 S.E. 2nd Street
Suite 3950
Miami, Florida 33131

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 PROPERTY AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.



NORMAN S. WEIDER, ESQ.

DATE: 11/16/05

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