Florida Department of State

Division of Corporations Public Access System

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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

ruby2ja, lle

Certificate of Status	0
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ARTICLES OF ORGANIZATION OF RUBY2JA, LLC

Article I. Name.

The name of the limited liability company is:

RUBY2JA, LLC

Article II. Address.

The mailing address and the street address of the principal office of the limited liability company is:

9100 S. Dadeland Blvd., #901 Miami, FL 33156

Article III. Registered Agent, Registered Office & Registered Agent's Signature.

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

Tescher Gutter Chaves Josepher Rubin Ruffin & Forman, P.A. 2101 Corporate Blvd., Suite 107 Boca Raton, FL 33431

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 that 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 under Chapter 608, F.S..

TESCHER GUTTER CHAVES JOSEPHER RUBIN RUFFIN & FORMAN, P.A.

By:

RICHARD A JOSEPHER, ESQ. Registered Agent's Signature

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Article IV. Management (check as applicable)

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

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.)

RICHARD A. KOSEPHER

Member or Authorized Representative of a Member of Typed or Printed Name of Signee

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SECRETAN: UF STATE TALLAHASSEE, FLORIDA

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