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A1A CORPORATE SERVICES

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Division of Corporations

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Florida Department of State  
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To:

Division of Corporations  
Fax Number : (850) 205-0383

From:

Account Name : A 1 A CORPORATE SERVICES, INC.  
Account Number : 120010000247  
Phone : (800) 494-3124  
Fax Number : (305) 675-2811

*[Handwritten signature]*

**LIMITED LIABILITY COMPANY**

**FANPRO INVESTMENTS, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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TALLAHASSEE, FLORIDA  
DIVISION OF CORPORATION

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**ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

**ARTICLE I NAME**

The name of the Limited Liability Company is:  
FANPRO INVESTMENTS, LLC

**ARTICLE II ADDRESS**

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

1521 ALTON RD

MIAMI BEACH FL 33139-3301

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE**

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

KAREN LEON

1521 ALTON RD

MIAMI BEACH FL 33139-3301

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 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..

  
KAREN LEON / Registered Agent's

**ARTICLE IV MANAGEMENT**

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

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TALLAHASSEE, FLORIDA

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ARTICLE V MEMBERS (optional)

MANAGING MEMBER:

KAREN LEON

1521 ALTON RD

MIAMI BEACH FL 33139-3301

\*\*\*\*\*

X

Signature of a member or an authorized representative of a  
(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.

KAREN LEON

Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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AND  
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