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To:

Division of Corporations

Fax Number

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Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number : Phone

072450003255 (305) 634-3694

Fax Number

(305) 633-9696

LIMITED LIABILITY COMPANY

international payment and processing solutions, llc

Certificate of Status Certified Copy Page Count 06 Estimated Charge \$155.00

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EMPIRE

HOSOO28212U ARTICLES OF ORGANIZATION FOR INTERNATIONAL PAYMENT AND PROCESSING SOLUTIONS, LLC

ARTICLE L-NAME

The name of this limited liability company shall be: INTERNATIONAL PAYMENT AND PROCESSING SOLUTIONS, LLC

<u>ARTICLE II. – ADDRESS</u>

The mailing address and street address of the principal office of the limited liability company is 630 N.E. 173 Terrace, North Miami Beach, FL 33162.

ARTICLE III.- MANAGEMENT

The limited liability company is to be a member managed company, and the name and address of such managers are: <u>CHAZON STEIN</u> of 630 N.E. 173rd Terrace, North Miami Beach, FL, STEVEN W. BREIR of 5151 Collins Avenue, Miami Beach, FL Apt. 835, 33140 and ALAIN PALINSKY, 7211 Fischer Island Drive, Fisher Island, Florida 33109. This limited liability company shall initially have three(3) managers. The number of managers of this company may be changed in accordance with the regulations of the company.

The initial managers shall serve until the first annual meeting of members or until his/their successor(s) is elected and qualified, or until his/their death or resignation.

ARTICLE IV.- PURPOSE AND POWERS

Except as restricted by these Articles of Organization, this limited liability company is organized for each and every legal and lawful purpose for which a limited liability company may be organized pursuant to Florida Limited Liability Company Act.

Except as restricted by these Articles of Organization, this limited liability company shall have and may exercise all powers and rights which a limited liability company may exercise under Florida law or the laws of the United States of America.

ARTICLE V.- INIITAL REGISTERED AGENT AND OFFICE

The initial registered agent for this limited liability company and the street address of the initial registered agent is: CHAZON STEIN of 630 N.E. 173rd Terrace, North Miami Beach, FL 33162

This Instrument was prepared by:

Sandor F. Genet, Esq. FL Bar No. 155959 SANDOR F. GENET & ASSOCIATES, P.A. 99 N.E. 167th Street North Miami Beach, FL 33162 (305) 653-0455 H05000282128

ARTICLE VL- REGULATIONS

The regulations of this limited liability company may only be adopted, amended, altered or repeated by the majority vote of the members.

ARTICLE VIL-MEMBERS RIGHT TO CONTINUE BUSINESS

The members remaining after the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or any other event which terminates the membership of a member, have the right to continue the business of this limited liability company subject to approval by unanimous vote of the remaining members; provided that at least one member remains.

ARTICLE VIII - AMENDMENT

This limited liability company reserves the right to amend, alter or repeal any provision contained in these Articles of Organization in accordance with the Florida Limited Liability Company Act.

this .	IN WITNESS WHEREOF, the undersigned have executed these Articles of Organizated day of 2005.	tion
	By: CHAZONSTEIN	
	Authorized Representative of the Members	
	By: STEVEN W. BREIR,	OS DEC
	Authorized Representative of the Members	9
	By: ALAIN PALINSKY Authorized Representative of the Members	AM 10: 39
	Authorized Kepresentative of the Members CERTIFICATE DESIGNATING RESIDENT AGENT	39

In pursuance of Chapter 608.415, Florida Statutes, the following is submitted in compliance with said Act:

That INTERNATIONAL PAYMENT AND PROCESSING SOLUTIONS, LLC is desiring to organize under the laws of the State of Florida with its principal office indicated in the articles of incorporation at the City of Aventura, County of Dade, State of Florida, has named <u>CHAZON STEIN</u>, located at 630 N.E. 173rd Terrace. North Miami Beach, FL 33162, County of Miami-Dade, State of Florida, as its agent to accept service of process within this State.

Authorized Representative of the Members

ACKNOWLEDGEMENT:

APPHOVE

Having been named Registered Agent to accept service of process for the above stated corporation, at place designated in this certificate. I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office, and I am familiar with, and accept the obligations of this position as provided for the chapter 608 F.S.

Registered Agent

SECHETARY OF STATE

COUNTY

AFFIDAVIT OF MANAGING MEMBERS

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My com	mission expires:		STEVEN W.			
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20.9 JRTDT

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taken an oath.	
JERY, C BASE Notary Public - State of Plants: W/Convenient-byths/Ger 1, 2007 Convenient & 007840004	NOTARY PUBLIC STATE OF FLORIDA

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