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FLORIDA/FOREIGN LIMITED LIABILITY CO

I Make It Happen LLC

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**ARTICLES OF ORGANIZATION  
OF  
I Make It Happen LLC**

**ARTICLE I NAME**

The name of the limited liability company shall be: **I Make It Happen LLC**

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this Limited Liability Company shall be: 13899 Biscayne Blvd., PH#3, North Miami Beach, Florida 33181.

**ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS**

The name and address of the initial registered agent is: Aaron Flores, 13899 Biscayne Blvd., PH#3, North Miami Beach, Florida 33181. Located in the County of Dade.


**ARTICLE IV DURATION**

The duration for the limited liability company shall be: 12/31/2046.

**ARTICLE V MANAGERS/MEMBERS**

The management of the limited liability company is reserved for the Managers and the name and address of the manager of the Limited Liability Company is:

Aaron Flores, 13899 Biscayne Blvd., PH#3, North Miami Beach, Florida 33181

  
Business Filings Incorporated, Organizer  
Mark Schiff, AVP

Authorized Representative

Prepared by Mark Schiff, Business Filings Incorporated, 8025 Excelsior Dr. Suite 200,  
Madison, WI 53717

(608) 827-5300

FAX AUDIT # 4060000195783

FAX AUDIT # 4060000195783CERTIFICATE OF DESIGNATION OF REGISTERED  
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES,  
THE UNDERSIGNED 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.

The name of the limited liability company is: **I Make It Happen LLC**

The name and address of the registered agent and office is Aaron Flores, 13899 Biscayne  
Blvd., PH#3, North Miami Beach, Florida 33181. Located in the County of Dade.

Having been named as registered agent and to accept service of process for the above  
stated 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.

Signature:   
Aaron Flores

Date: 1/19/06

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