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To:

Division of Corporations

Fax Number

: (850)205-0383

From: Account Name : AKERMAN SENTERFITT & EIDSON Account Number : 076656002425 Phone : (407)843-7860 Fax Number : (407)843-6610 FLORIDA/FOREIGN LIMITED LIABILITY CO.

TWELFTH NIGHT ENTERPRISES, LLC

Certificate of Status	1
Certified Copy	
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of this limited liability company is: TWELFTH NIGHT ENTERPRISES, LLC (the "Company").

ARTICLE II - Address

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

4700 Millenia Boulevard, Suite 175 Orlando, Florida 32839

ARTICLE III - Existence and Duration

The Company shall commence its existence on the date that these Articles of Organization are filed and its duration shall be perpetual unless sooner dissolve by law.

ARTICLE IV - Management

The Company is to be managed by one or more members and is therefore a member-managed company. The

Paul Shakespeare 4700 Millenia Blvd. Ste 175 Orlando, Fl 32839

ARTICLE V - Registered Agent

The name and street address of the initial registered agent of the Company is:

un 24/06

Paul Shakespeare 4700 Millenia Blvd. Stc 175 Orlando, Fl 32839

By:

Paul Shakespeare, Managing 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.)

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REGISTERED AGENT ACCEPTANCE

Having been named as registered agent and to accept service of process for the above stated limited liability cor pany at the place designated in this certificate, I hereby accept the appointment as registered agent and agrae 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, Florida Statutes.

PAUL SHAKESPEARE, Registered Agent

Paul Shakespeare

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