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To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : FILINGS, INC. Account Number : 072720000101 Phone : (850)385-6735 Fax Number : (954)641-4192

CORPOS	RIDA/FOREIGN LIMI		TY CO.
4	DETAILS, DETAILS II, LLC		
ă	Certificate of Status		
DIVISION	Certified Copy	0	
	Page Count	02	
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME

The name of the Limited Liability Company is:

DETAILS, DETAILS, DETAILS II, LLC

ARTICLE II - ADDRESS

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

6089 Bither Way Lake Worth, FL 33487

ARTICLE III - DURATION

The period of duration for the Limited Liability Company shall be: Perpetual

ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be manager by the manager and the name(s) and address(es) of the manager(s) is/are:

Alex Stefanesco 8089 Bither Way Lake Worth, FL 33467

ARTICLE V - ADMISSION OF ADDITIONAL MEMBERS:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be: Members may admit additional members upon majority agreement of current members.

ARTICLE VI - MEMBERS RIGHTS TO CONTINUE BUSINESS:

The death, retirement, resignation, expulsion, bankruptcy or dissolution of any members, or the occurrence of any event which terminates the continued membership of

Steven Serie, P.A., 6070 N. Federal Highway, Boca Raton, FL 33487 Telephone: 561-912-3500, Florida Bar No. 0048736

DIVISION OF CORPORATION

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a member of this limited liability company, shall terminate this company, unless the remaining members shall unanimously agree to continue the business of the company, in which event, this company shall not so terminate.

IN WITNESS WHEREOF, the undersigned representative of a Member has executed these Articles of Organization on this 123 day of 100 Civ., 2006,

Authorized Representative of a Member

Printed Name of Authorized Representative: Alex Startanesco

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 608.415 or 608.507. Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate Registered Office and Registered Agent In the State of Florida.

- 1. The name of the limited liability company is DETAILS, DETAILS,
 - The name and address of the registered agent and office is:

Alex Stefanesco 6089 Bither Way Lake Worth, FL 33467

ACKNOWLEDGMENT:

Having been named 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 statues 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.

Dated: Malk 23, 2006

ALEX STEFANESCO

Registered Agent

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DIVISION OF CORPORATION