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Florida Department of State

Division of Corporations

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

From: Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305)634-3694  
Fax Number : (305)633-9696

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DIVISION OF CORPORATIONS

FLORIDA/FOREIGN LIMITED LIABILITY CO.

drawtoon technology, llc

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Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME:

The name of the Limited Liability Company is:

DrawToon Technology, LLC

(Must end with the words "Limited Liability Company", "Limited Company" or their abbreviation "LLC" or "L.C.")

ARTICLE II - Address:

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

Principal Office Address: Mailing Address:

10796 Pines Blvd, Suite 101  
Pembroke Pines, FL 33026

ARTICLE III - Registered Agent, Registered Office, & Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Howard Fabian  
(Name)

10796 Pines Blvd, Suite 101  
Florida street address (not P.O. box)

Pembroke Pines, FL 33026  
City, State and Zip

Having been named as registered agent and 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.

Registered Agent's Signature (Required)

ARTICLE IV - Manager(s) or Managing Member(s):

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The name and address of each Manager or Managing Member is as follows:

Title:  
"MGR" = Manager

Name and Address:  
Donovan Powell  
John A. Younes  
Howard Fabian  
Rafael Fernandez

"MGRM" = Managing Member

All have the address listed above

ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_  
(Optional) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



Signature of member or an authorized representative of a member

(In accordance with section 608.408(2), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Howard Fabian

Typed or printed name of signer

SECRETARY OF STATE  
CLERK OF COURTS

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