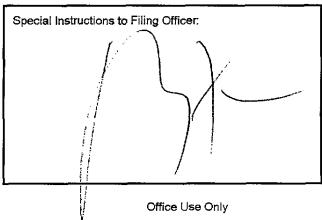
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(Request	tor's Name)
(Address	;)
(Address	s)
(City/Stat	te/Zip/Phone #)
PICK-UP] WAIT MAIL
(Busines	ss Entity Name)
(Docume	ent Number)
Certified Copies	Certificates of Status
Special Instructions to Filing	ı Officer:





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2006 APR -5 PK 12: SECRETARY OF STA

RECEIVED



ACCOUNT NO. : 072100000032

REFERENCE: 964003 7291467

AUTHORIZATION C

COST LIMIT : \$125.00

ORDER DATE: April 4, 2006

ORDER TIME : 9:0 AM

ORDER NO. : 964008-005

CUSTOMER NO: 7291467

DOMESTIC FILING

NAME: CREX HELLENBRAND LLC

EFFECTIVE DATE:
XX ARTICLES OF ORGANIZATION

THE THEFT COURS OF ORGINEEDING TON

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd - EXT. 2940

EXAMINER'S INITIALS:

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPÁ

ARTICLE I - Name:	
The came of the Limited Liability Commany	191

CREX-HELLENBRAND LLC	
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Liability Company is:
Principal Office Address:	Malling Address:
1901 Avenue of the Stare, Strite 400	1901 Avenus of the Stars, Suite 400
Los Angeles, CA 90067	Las Angeles, CA 90067

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

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

Richard Hellt	suptand
	Name
4636 Corona	ido Parkway, Sulte 2
	Florida street address (P.O. Box NOT acceptable)
Capa Coral,	FL 33904
	City, State, and Zin

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

(CONTINUED)

Pagel of 2

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

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

<u> Title:</u>	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MOKM - Managing Member	
MGR	Warren J. Kessler
	1901 Avenue of the Stars, Suite 400
	Los Angeles, CA 90067

<u></u>	
(Use attachment if necessary)	
NOTE: An additional article mus	t be added if an effective date is requested.
(10 fb. An additional at their mus	i be added it all except care is requested.
REQUIRED SIGNATURE:	
Warm &	Kessey / ruident
Signature of a memb	er or an authorized representative of a member.
	ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury herein are true.)
Warren J. Kessler	
<u> </u>	yped or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)