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Florida Department of State
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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 CORPORATION

FLORIDA/FOREIGN LIMITED LIABILITY CO.

CLAUDIA KIRSTEN LIPCON LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION
FOR FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name of Limited Liability Company:

CLAUDIA KIRSTEN LIPCON LLC

ARTICLE II - Mailing Address & Street Address of Limited Liability Company:

**ONE BISCAYNE TOWER
STE 2480
MIAMI, FL 33131**

ARTICLE III - Registered Agents Name, Office Address, & Registered Agents Signature:

**CHARLES LIPCON
ONE BISCAYNE TOWER
STE 2480
MIAMI, FL 33131**

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...

Charles Lipcon

Registered Agent's Signature

Date 04/13/2006

☒ Article IV - Management (Check box if applicable.)
The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company. Specify name & address(es).

1. **CLAUDIA KIRSTEN LIPCON**
ONE BISCAYNE TOWER, STE 2480, MIAMI, FL 33131

CLIPCON

Signature of a member or an authorized representative of a 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.

CLAUDIA KIRSTEN LIPCON

Typed or printed name of signee

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TALLAHASSEE, FLORIDA

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