

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)205-0383

Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

: (305)634-3694

Fax Number

: (305)633-9696

FLORIDA/FOREIGN LIMITED LIABILITY CO

A CAMPES rose no llo

Certificate of Status Certified Cop 1 02 Estimated Charge \$155.00

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5/3/2006 3-08 PM EMPIRE CORP. -MAY-03-2006 15:30



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I Name:

The name of the Limited Liability Company is:

ROSE NC LLC

ARTICLE II Management:

The Limited Liability Company may be managed by one or more managers and may therefor be a manager-managed Company.

ARTICLE III Address:

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

> ROSE NC LLC c/o Bonnie & Miller CPA 9050 Pines Blvd/Buite 301 Pembroka Pines FL 33024

ARTICLE IV Registered Agent; Registered Office; & Registered Agent's signature:

> Bonnie S Miller 9050 Pines Blvd/suite 301 Pembroke Pines FL 33024

Having been named as Registered Agent and to accept service of process for the above stated Limited Liability Company ap the place designated in the Cartificate, I hereby accept the appointment as registered Agent and agree to act in that 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 confidence and agree to the obligations of my position as Registered Agent as provided for in Chapter 608 F

> Bonnie 5 Miller Registered Agent

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.

Dated: May 3 2006

Bonnie/B Miller

Manager

Z2/Z2°-4

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