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From: Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
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FLORIDA/FOREIGN LIMITED LIABILITY CO  
TIVE STUDIO, L.L.C.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**ARTICLE I Name**

**The name of the Limited Liability Company is:**

**TIVE STUDIO, L.L.C.**

**ARTICLE II Principal Place of Business**

**The principal place of business and mailing address of this Limited Liability Company shall be:**

**11436 NW 43<sup>RD</sup> TERRACE  
DORAL, FL 33178**

**ARTICLE III Duration**

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

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**ARTICLE IV Management**

The limited liability company is to be managed by the members and the name and addresses of the managing members are:

**DANIEL GUINAN**  
11438 NW 43<sup>RD</sup> TERRACE DORAL, FL 33178

**ELIANA CORTES**  
11436 NW 43<sup>RD</sup> TERRACE DORAL, FL 33178

**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 subject to the approval of all current members

**ARTICLE VI Members Right to Continue Business**

The right, if given, of the remaining members of the limited liability company to continue the business upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

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DANIEL GUINAN

Signature of a member or an authorized representative of a member.

(In accordance with Section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under penalties of perjury that the facts stated herein are true.)

**ARTICLE VI Initial Registered Agent and Office Street Address**

The name and address of the initial registered agent is:

**DANIEL GUINAN**  
11438 NW 43<sup>RD</sup> TERRACE  
DORAL, FL 33178

**CERTIFICATE DESIGNATING REGISTERED AGENT AND REGISTERED PLACE OF BUSINESS OR DOMICILE FOR THE PROCESS WITHIN THE STATE OF FLORIDA, AND ACCEPTANCE OF AGENT UPON WHOM PROCESS MAY BE SERVED**

Pursuant to the provisions of sections 608.415 or 608.507, Florida Statutes, the *Undersigned Limited Liability Company*, organized under laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the Limited Liability Company is:

**TIVE STUDIO, L.L.C.**

2. The name and address of the registered agent and office is:

**DANIEL GUINAN  
11436 NW 43<sup>RD</sup> TERRACE  
DORAL, FL 33178**

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**ACCEPTANCE OF REGISTERED AGENT**

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 PURSUANT TO P.S. 608.507.

SIGNATURE



DATE

06/22/06