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## FŁORIDA/FOREIGN LIMITED LIABILITY CO.

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### Fresh Squeezed Designs LLC

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#### ARTICLES OF ORGANIZATION **OF** Fresh Squeezed Designs LLC

ARTICLE I

NAME

The name of the limited liability company shall be: Fresh Squeezed Designs LLC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 1470 NE 60th Street, Fort Lauderdale, Florida 33334.

INITIAL REGISTERED AGENT & STREET ADDRESS ARTICLE III

The name and address of the initial registered agent is: Mary Cotton, 1470 NE 60th Street, Fort Lauderdale, Florida 33334. Located in the County of Broward.

ARTICLE IV DURATION

The duration for the limited liability company shall be: 12/31/2046.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the names and addresses of the members of the Limited Liability Company are:

Hannah Kim, 242 E 87th Street, Apt 1-A, New York, New York 10128 Camille Read, 242 E 87th Street, Apt 1-A, New York, New York 10128

Business Filings Incorporated, Organizer

Mark Schiff, AVP

Authorized Representative

Prepared by Mark Schiff, Business Filings Incorporated, 8025 Excelsior Dr., Suite 200,

Madison, WI 53717 (608) 827-5300

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## FAX AUDIT # HOLOWON 8 16533

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: Fresh Squeezed Designs LLC

The name and address of the registered agent and office is Mary Cotton, 1470 NE 60th Street, Fort Lauderdale, Florida 33334. Located in the County of Broward.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature: ///

Mary Cotton

Date: 7 / 14/ 06

SECRETARY OF STATE DIVISION OF CORPORATIONS

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