

Aug-21-2006 10:06am

DAVID WILLIAMS

302-575-0925

8/21/06

F-939

Division of Corporations

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Florida Department of State

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : AGENTS AND CORPORATIONS, INC

Account Number : I20010000112

Phone : (302)575-0875

Fax Number : (302)575-0925

FLORIDA/FOREIGN LIMITED LIABILITY CO.

ICON MIAMI GROUP, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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FROM :

FAX NO. :

Aug. 18 2006 03:25PM P2

H06000209257 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ICON MIAMI GROUP, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

c/o Gerber & Co.
8501 Wilshire Boulevard, Suite 220
Beverly Hills, California 90211

Mailing Address:

c/o Gerber & Co.
8501 Wilshire Boulevard, Suite 220
Beverly Hills, California 90211

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Agents and Corporations, Inc.

Name

773 4th Avenue North, Suite E

Florida street address (P.O. Box **NOT** acceptable)

Naples,

FL 34102

City, State, and Zip

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 (REQUIRED)

(CONTINUED)

Page 1 of 2

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06 AUG 21 AM 10:57

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FAX NO. :

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Phil Shawe

c/o Gerber & Co.

8601 Wilshire Blvd, Ste. 220 Beverly Hills, CA 90211

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:


Signature of a member or 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.)

Barry D. Kaye, Esq., Attorney - in - Fact

Typed or printed name of signer

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)

Page 2 of 2

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