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| (Re | questor's Name) | | |
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| PICK-UP | ☐ WAIT | MAIL | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies | _ Certificates | of Status | |
| Special Instructions to Filing Officer: | | | |
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| ON SERVICE COMPANY | | | |
|--|--|--|--|
| ACCOUNT NO. : 072100000032 | | | |
| REFERENCE: 552378 7291467 | | | |
| AUTHORIZATION Spellelena | | | |
| COST LIMIT : \$ 185.00 | | | |
| ORDER DATE: October 24, 2006 | | | |
| ORDER TIME : 9:01 AM | | | |
| ORDER NO. : 552378-005 | | | |
| CUSTOMER NO: 7291467 | | | |
| | | | |
| DOMESTIC FILING | | | |
| NAME: CREX-MONDONE LLC | | | |
| EFFECTIVE DATE: | | | |
| ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION | | | |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: | | | |
| XX CERTIFIED COPY (2 SETS) PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING | | | |
| CONTACT PERSON: Matthew Young - EXT. 2962 | | | |

EXAMINER'S INITIALS:

| ARTICLE I - Name: The name of the Limited Liability Company | vis: |
|---|---|
| The name of the Chined Clabinty Company | /B. 3 2 0 |
| CREX-MONDONE LLC | |
| ARTICLE II - Address: The mailing address and street address of the | e principal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 1901 Avenue of the Stars, Suite 400 | 1901 Avenue of the Stars, Suite 400 |
| Los Angeles, CA 90067 | Los Angeles, CA 90067 |
| The name and the Florida street address of t | |
| | ame |
| 1201 Hays Street | |
| Florida stree | t address (P.O. Box <u>NOT</u> acceptable) |
| Tallahassee | FL 32301 |
| City, Str | ate, and Zip |
| liability company at the place designated registered agent and agree to act in this cape statutes relating to the proper and complete | to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all e performance of my duties, and I am familiar with and registered agent as provided for in Chapter 608, F.S |
| | Matthew Young √ / i as its agent |

(CONTINUED)

Registered Agent's Signature

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

| <u> Title:</u> | | Name and Address: |
|-------------------------------|--|--|
| "MGR" = Manag "MGRM" = Man | | |
| MGR | | Warren J. Kessler |
| | | 1901 Avenue of the Stars, Suite 400 |
| | | Los Angeles, CA 90067 |
| | | |
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| | | |
| (Use attachment i | if necessary) | |
| NOTE: An add | itional article must be | added if an effective date is requested. |
| REQUIRED SIG | GNATURE: | , |
| | Warm & | Kem |
| | Signature of a member of | an authorized representative of a member. |
| | (In accordance with section of this document constitute that the facts stated here | n 608.408(3), Florida Statutes, the execution is an affirmation under the penalties of perjury in are true.) |
| | Warren J. Kessler | |
| | Typed | or printed name of signee |
| | | |

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)