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| PICK-UP | WAIT | MAIL | | | | |
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| Certified Copies | _ Certificates | of Status | | | | |
| Special Instructions to Filing Officer: | | | | | | |
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| | egistration So ivision of Co | | | | |
|---|---------------------------------|----------------------|-----------------------------|---|--|
| SUBJECT | ` : | ACES UP | PROPERTIES, | LLC | |
| 0020201 | | | (Name of Limite | d Liability Company) | |
| The enclos | ed Articles o | f Organizatio | on and fee(s) are s | ubmitted for filing. | |
| Please retu | rn all corresp | ondence con | cerning this matte | er to the following: | |
| 1 | MICHAEL J | J. SABA, | ATTORNEY AT | | |
| | | | (1 | Name of Person) | |
| | LAW OFFIC | CES OF SA | ABA & SABA | | |
| | | | (| Firm/Company) | |
| | 240 S. PI | INEAPPLE | AVE., SUITE | 702 | |
| | | | | (Address) | |
| : | SARASOTA, | , FL 3423 | 36-6724 | | |
| | | | (City | /State and Zip Code) | |
| For further | information | concerning t | his matter, please | call: | |
| MICHAEL J. SABA | | at (941) 365-9400 | | | |
| (Name of Person) (Area Code & Daytime Telephone Number) | | | | Telephone Number) | |
| Enclosed | is a check fo | or the follow | ving amount: | | |
| \$125.00 | Filing Fee | | 00 Filing Fee & e of Status | \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) | X \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | | Division of P.O. Box | on Section of Corporations | Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 3230 | ons er Circle |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME

The name of the Limited Liability Company is: ACES UP PROPERTIES, LLC

ARTICLE II - ADDRESS

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

6451-A 19th Street East Sarasota, FL 34243

ARTICLE III - REGISTERED AGENT AND OFFICE

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

Steve Solomon 7916 Oak Grove Circle Sarasota, FL 34243

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

ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by one or more of its members, and is therefore a member-managed company. The name and address of each Managing Member is:

S

MGRM:

Steve Solomon

7916 Oak Grove Circle Sarasota, FL 34243

(CONTINUED)

ARTICLE V - EFFECTIVE DATE

These Articles of Organization shall be in effect upon filing with the Florida Department of State.

REQUIRED SIGNATURE:

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 herein are true.

STEVÉ SOLOMON, Managing Member

Date