Florida Department of State Division of Corporations

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : RICARDO A. ROIG, P.A.

Account Number: I20020000054 : (813)876-0088 Fax Number : (813)876-0445

| FLORIDA/FOREIGN LIMITED LIABILITY CO MAASA, LLC Certificate of Status | | | |
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ARTICLES OF ORGANIZATION OF MAASA, LLC

The undersigned hereby files these Articles of Organization effective this 15th day of November, 2006.

ARTICLE I NAME

The name of the Limited Liability Company is MAASA, LLC.

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is 410 Ware Boulevard, Suite 300, Tampa, Florida 33619.

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE, AND REGISTERED AGENT'S SIGNATURE

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

Ricardo A. Roig, P.A. 4023 North Armenia Avenue, Suite 400 Tampa, Florida 33607

ARTICLE VI MANAGEMENT

The Limited Liability Company is to be managed by one or more Managers and is, therefore, a manager-managed company. The initial Manager is:

Vivienne Gordon 410 Ware Boulevard, Suite 300 Tampa, Florida 33619

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.)

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Ricardo A. Roig

Typed or printed name of signee

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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 as provided in Chapter 608, F.S.

Registered Agent's Signature