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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 : USA CORPORATE SERVICES INC.
Account Number : I20000000220
Phone : (800)891-7432
Fax Number : (518)433-1489

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

DOUTZEN, LLC

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Estimated Charge	\$155.00

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December 14, 2006

FLORIDA DEPARTMENT OF STATE
Division of Corporations

USA CORPORATE SERVICES

SUBJECT: DOUTZEN, LLC
REF: W06000053812

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

DOITZEN, 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:Mailing Address:257 Miracle Mile
Coral Gables, FL 33146257 Miracle Mile
Coral Gables, FL 33146

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:

Lauren Martinez

Name

257 Miracle MileFlorida street address (P.O. Box **NOT** acceptable)Coral Gables, FL 33146

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)

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

Title: _____

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

Managing Member

Lauren Martinez

257 Miracle Mile

Coral Gables, FL 33146

Managing Member

Diamond Award

350 Fifth Avenue, Suite 6617

New York, New York 10118

(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 an 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.)

Lauren Martinez

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)

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