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Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
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Fax Number : (305) 633-9696

FLORIDA/FOREIGN LIMITED LIABILITY CO.

2137 HAYES STREET, LLC

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**ARTICLES OF ORGANIZATION FOR**

**2137 HAYES STREET, LLC**

The undersigned, a member or authorized representative, hereby subscribes to these Articles of Organization to form a limited liability company (the "Company") under the Florida Limited Liability Company Act (Chapter 608, Florida Statutes) and in accordance with F.S. Section 608.407.

**ARTICLE I**  
**NAME**

The name of the Company is

**2137 HAYES STREET, LLC**

**ARTICLE II**  
**MAILING AND STREET ADDRESS**

The mailing and street address of the principal office of the Company is

**2101 NW Corporate Blvd., Suite 320  
Boca Raton, FL 33431**

**ARTICLE III**  
**REGISTERED AGENT AND OFFICE**

The name and street address of the Company's initial registered agent in Florida is

**Brad Axel  
2101 NW Corporate Blvd., Suite 320  
Boca Raton, FL 33431**

**ARTICLE IV**  
**MANAGER(S) OR MANAGING MEMBER(S)**

**Brad Axel - Managing Member  
Laurence Schneider - Managing Member**

IN WITNESS WHEREOF, the undersigned Member or authorized representative has executed these Articles of Organization as of the 20 day of December, 2006.

Brad Axel  
Brad Axel, Managing Member

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA

1. The name of the limited liability company is:  
  
2137 HAYES STREET, LLC
  
2. The name and address of the registered agent and office is:  
  
Brad Axel  
2101 NW Corporate Blvd., Suite 320  
Boca Raton, FL 33431

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.

By: \_\_\_\_\_

Date: \_\_\_\_\_

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