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Florida Department of State

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Division of Corporations

Pax Number : (850)205-0383

Account Name : EMPIRE CORPORATE KIT COMPANY

ORIDA/FOREIGN LIMITED LIABILITY CO.

Account Number : 072450003255

Phone : (305)634-3694 Fax Number : (305)633-9696

shama llc

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ARTICLES OF ORGANIZATION OF SHAMA LLC A Florida Limited Liability Company

ARTICLE I-NAME

The name of the Limited Liability Company is:

SHAMA LLC

ARTICLE II-ADDRESS:

The mailing address and street address of the principle office of the Limited Lizbility Company is:

PRINCIPAL OFFICE ADDRESS:

MAILING ADDRESS:

3221 N.W 75TH TERRACE DAVIE, FLA. 33024

3221 N.W 75TH TERRACE DAVIE, FLA. 33024

ARTICLE III- RECISTERED AGENT, REGISTERED OFFICE, REGISTERED AGENT'S SIGNATURE: The name and the Florida street address of the registered agent are:

ALI M. ALISHAMA

3221 N.W 75TH TERRACE FLORIDA STREET ADDRESS (P.O BOX NOT ACCEPTABLE)

DAVIE, FLORIDA 33024

2001 FEB -5 A 10: 22 SECRETARY OF STATE ALLAHASSEE, FLORIFIA

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS 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 FURTHERAGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFOMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT AS PROVIDED FOR IN CHAPTER 608 MIS

REGISTERED AGENT SIGNATURE

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ARTICLE IV-MANAGEMENT/MEMBER(S): The name(s) and address (es) of each Manager or Managing Member is as follows: Title: Name and address: MGR= Manager MGR= Manager MGR= ALI M. ALISHAMA 3221 N.W 75TH TERRACE DAVIE, FL. 33024. **Comparison of the control of the control

(In accordance with section 602.403(B), Florida Statutes, the execution of this document Constitutes an affirmation under the penaltics of perjuty that the facts stated herein are true.)

SIGNATURE OF A MEMBER OR AN AUTHORIZED REPRESENTATIVE OF A MEMBER.

ALI M. ALISHAMA
Typed or printed name of signed

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