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To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : FIELDSTONE LESTER SHEAR & DENBERG

Account Number : Il9990000180 Phone ; (305)357-5775 Fax Number

: (305)357-5534

FLORIDA/FOREIGN LIMITED LIABII

Full Moon Accessories, LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Full Moon Accessories, LLC

ARTICLE II - Address:

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

1395 Brickell Avenue, Ste 827 Miami, Florida 33131

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Fieldstone Lester Shear & Denberg, LLP

Michael J. Rosenbaum

Name

201 Alhambra Circle, Suite 601

Florida street address (P.O. Box NOT acceptable)

Coral Gables, Florida 33134 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.

Article IV - Management:

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

giştered Agent's Signature

The initial manager of the Limited Liability Company is:

1395 Brickell Avenue, Ste 827 Miami, Florida 33131

Signature of a member of 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.)

Maria Del Mar Santalia, Authorized Representative

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