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| (Re | equestor's Name) | |
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| (Ad | ldress) | |
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| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | WAIT | MAIL |
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| Certified Copies | Certificates | |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

| TO: | Registration Se Division of Co | | | | | |
|----------|-----------------------------------|---|-----------|--|--|--|
| SUBJE | CT: WORL | D WIDE REALTY, LL | С . | | | |
| | | (Name of Limite | d Liabil | ity Con | npany) | _ |
| The end | closed Articles of | f Organization and fee(s) are s | ubmitte | d for fil | ing. | • |
| Please 1 | eturn all corresp | ondence concerning this matte | er to the | followi | ng: | |
| 4 | AMY HUN | ΓER | | | | |
| | | (i | Name of | Person) | | |
| | NATIONAL | . CORPORATE HEA | ADQL | JART | ERS, INC | • |
| • | | (| (Firm/Co | mpany) | | |
| | 101 CON\ | ENTION CENTER | R DR. | STE | 700 | |
| | · · · · · · | | (Add | ress) | | |
| | Las Vegas | s, NV 89109 | | | | |
| - | | (City | /State an | d Zip Co | ode) | |
| For furt | her information | concerning this matter, please | call: | | | |
| AMY | HUNTER | | at (70 | 02 | , 873-348 | 88 EXT. 3212 |
| | (Name | of Person) | - ar (| (Area C | ode & Daytime T | Selephone Number) |
| Enclos | ed is a check fo | or the following amount: | | | | |
| \$125 | .00 Filing Fee | \$130.00 Filing Fee & Certificate of Status | Certi | fied Co | Filing Fee & opy by is enclosed) | \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | · | Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | Registr Division Cliftor 2661 E | Courier Addre ration Section on of Corporation Building Executive Cente assee, FL 32301 | ons r Circle |

PHYSICAL: Dept. of State

Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

(850) 245-6052

MAILING: Dept. of State

Division of Corporations

Corporate Filings P.O. Box 6327

Tallahassee, FL 32314

FROM: National Corporate Headquarters, Inc.

101 Convention Center Dr., Ste 700

Las Vegas, NV 89109

(800) 398-1077 (702) 889-6812

DATE: Monday, May 21, 2007

To Whom It May Concern:

Attached, please find the following document(s):

• Articles of Organization for WORLD WIDE REALTY, LLC

We have included payment in the amount of \$125.00 for the following fees:

- Filing fee -\$125.00
- Other: Please "File" stamp & return other provided copy

If there are any questions, please call Amy HunterAmy Hunter at 800-398-1077.

Please return the file stamped copy in the postage paid envelope enclosed. Thank you for your continued service!

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is | : | |
|--|--|--|
| WORLD WIDE REALTY, LLC | | |
| (Must end with the words "Limited Liability Company, "Limit | ted Company" or their abbreviation "LLC," | or "L.C.,") |
| ARTICLE II - Address: The mailing address and street address of the p | rincipal office of the Limited Lia | bility Company is: |
| Principal Office Address: | Mailing Address: | ,, |
| 4130 NORTH SACRAMENTO AVE | | |
| BEVERLY HILLS, CA 34465 | | |
| | | |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.) The name and the Florida street address of the | stered Agent. You must designate an individ | |
| | | |
| BUSINESS FILINGS INCOR | | |
| | | |
| 1203 GOVERNORS SQUA | | |
| Florida street ad | dress (P.O. Box <u>NOT</u> acceptable) | |
| TALLAHASSEE | FL 32301-2960 | |
| City, State, | and Zip | |
| Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capacity statutes relating to the proper and complete paccept the obligations of my position as regions. | this certificate, I hereby accept the ty. I further agree to comply with erformance of my duties, and I am | e appointment as the provisions of all familiar with and |
| Registered Agent's Signa Susiness Filmss (CONTIN Page 1 of | Incorporated NUED) | 2007 JUN -4 PM 2: 10 SECRETARY OF STATE TALLAHASSEE, FLORIDA |

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

The name and address of each Manager or Managing Member is as follows:

| Title: "MGR" = Manager "MGRM" = Managing Mem | Name and Address: |
|---|--|
| MGR | CONSTANCE B. MOUBIO |
| WGR | CONSTANCE R. MOUDIS 4130 NORTH SACRAMENTO AVE |
| | BEVERLY HILLS, CA 34465 |
| | |
| | |
| | |
| | |
| | |
| | W 197 |
| (Use attachment if necessary | r) |
| CLE V: Effective date, if other effective date is listed, the date | r than the date of filing: (OPTIONAL) e must be specific and cannot be more than five business days p |
| CLE V: Effective date, if other | r than the date of filing: (OPTIONAL) e must be specific and cannot be more than five business days p) |
| CLE V: Effective date, if other effective date is listed, the date 0 days after the date of filing. REQUIRED SIGNATURE | r than the date of filing: (OPTIONAL) e must be specific and cannot be more than five business days p) |
| CLE V: Effective date, if other effective date is listed, the date 0 days after the date of filing. REQUIRED SIGNATURE Signature of (In accordan of this docur | r than the date of filing: (OPTIONAL) e must be specific and cannot be more than five business days p :: |
| CLE V: Effective date, if other effective date is listed, the date 0 days after the date of filing. REQUIRED SIGNATURE Signature of (In accordan of this docur | r than the date of filing: (OPTIONAL) e must be specific and cannot be more than five business days p f a member or an authorized representative of a member. the with section 608.408(3), Florida Statutes, the execution ment constitutes an affirmation under the penalties of perjury cts stated herein are true.) |
| CLE V: Effective date, if other effective date is listed, the date 0 days after the date of filing. REQUIRED SIGNATURE Signature of (In accordan of this docur that the face) | r than the date of filing: (OPTIONAL) e must be specific and cannot be more than five business days p f a member or an authorized representative of a member. Ice with section 608.408(3), Florida Statutes, the execution ment constitutes an affirmation under the penalties of perjury cts stated herein are true.) TER Typed or printed name of signer. |
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