

Division of Corporations

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Annabel Chiromedia, LLC

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**ARTICLES OF ORGANIZATION
OF
Annabel Chiromedia, LLC
A Florida Limited Liability Company**

The undersigned, being desirous of forming a limited liability company pursuant to Chapter 608, Florida Statutes, hereby certifies as follows:

1. Name of Limited Liability Company. The name of the limited liability company is **Annabel Chiromedia, LLC** a Florida limited liability company (the "Company").
2. Period of Duration. The period of duration for the Company shall be perpetual.
3. Principal Office. The mailing address and street address of the principal office of the Company shall be 209 Avenue O, SW, Winter Haven, Florida 33880.
4. Agent for Service of Process; Address of Registered Agent. The initial registered agent of the Company for service of process shall be Joanes J. Polynice, 209 Avenue O SW, Winter Haven, Florida 33880.
5. Right to Admit Additional Members. The Company shall have the right to admit additional members only with the consent of all members. The initial members of the Company are Joanes J. Polynice and Velas Melle. The initial Managing Member shall be Joanes J. Polynice.
6. Member Management. The Company shall be managed by its members.

IN WITNESS WHEREOF, the undersigned has executed the Articles of Organization on this 12th day of June, 2007, in his capacity as an authorized agent on behalf of the Company



Joanes J. Polynice, Member

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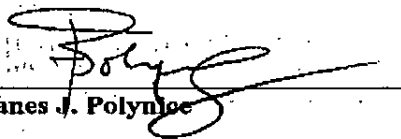
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ACCEPTANCE OF APPOINTMENT

The undersigned, Joanes J. Polynice, hereby acknowledges and accepts its appointment as registered agent of **Annabel Chiromedia, LLC**, a Florida limited liability company (the "Company"), and agrees to act in that capacity and to comply with the provisions of the Florida Limited Liability Company Act relative thereto. The undersigned is familiar with, and accepts, the obligations of a registered agent appointed as provided for in Chapter 608 of the Florida Statutes.


Dated this 12th day of June, 2007.

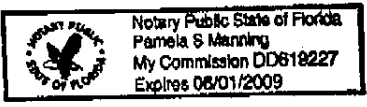

Joanes J. Polynice

ACKNOWLEDGMENT

STATE OF FLORIDA)
) SS:
COUNTY OF ORANGE)

The foregoing instrument was acknowledged before me this 12th day of June, 2007, by **Joanes J. Polynice**, as Registered Agent, who is personally known to me or who has produced _____ as identification.


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