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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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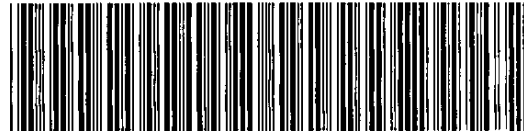
(Business Entity Name)

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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 213723 7135588

AUTHORIZATION :

COST LIMIT : \$125.00

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TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

ORDER DATE : September 5, 2007

ORDER TIME : 2:37 PM

ORDER NO. : 213723-005

CUSTOMER NO: 7135588

DOMESTIC FILING

NAME: COMRAS, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION  
CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY  
XX PLAIN STAMPED COPY  
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd - EXT. 2940

EXAMINER'S INITIALS: \_\_\_\_\_

**ARTICLES OF ORGANIZATION  
FOR  
Comras, LLC**

**ARTICLE I  
Name**

The name of the Limited Liability Company is **Comras, LLC**.

**ARTICLE II  
Address**

The mailing address and street address of the principal office of the Limited Liability Company is: 407 Lincoln Road Suite 9-F, Miami Beach, Florida 33139.

**ARTICLE III  
Commencement of Existence and Duration**

The Limited Liability Company shall commence its existence as of September 5, 2007, and its existence shall be PERPETUAL.

**ARTICLE IV  
Purpose**

This Limited Liability Company is organized for the purpose of transacting any or all lawful business for which limited liability companies may be organized under the Florida Limited Liability Company Act.

**ARTICLE V  
Registered Agent**


The street address of the initial registered office of the Limited Liability Company shall be Therrel Baisden, P.A., SunTrust International Center, One S.E. 3rd Avenue, Suite 2950, Miami, Florida 33131 and the name of the initial registered agent of the Limited Liability Company at that address is Ellen Rose, Esq.

**ARTICLE VI  
Manager-Managed Company**

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

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TALLAHASSEE, FLORIDA

The undersigned authorized representative of a member of Comras, LLC, hereby executes these articles of organization on this 5 day of September, 2007.



ELLEN ROSE, ESQ., authorized representative by  
Power of Attorney


**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 TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is **Comras, LLC**.
2. The name and the Florida street address of the registered agent and office are:

Ellen Rose, Esquire  
Therrel Baisden, P.A.  
SunTrust International Center  
One S.E. 3rd Avenue, Suite 2950  
Miami, Florida 33131

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.

  
\_\_\_\_\_  
Ellen Rose, Esq.