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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
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TALLAHASSEE, FLORIDA

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**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**clispcreations, llc**

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ARTICLES OF ORGANIZATION  
OF  
CLIPSO CREATIONS, LLC

ARTICLE I - NAME

The name of the Limited Liability Company is CLIPSO CREATIONS, LLC (the "Company").

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Company is: 8660 S.W. 212<sup>TH</sup> Street, Unit 205, Miami, Florida 33189.

ARTICLE III - DURATION

The period of duration for the Company shall be perpetual.

ARTICLE IV - MANAGEMENT

The Company will be a manager-managed Company. The name and address of the Manager is:

Chris Cutrona  
8660 S.W. 212<sup>TH</sup> Street  
Unit 205  
Miami, Florida 33189

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ARTICLE V - EFFECTIVE DATE

The effective date of formation of the Company is October 1, 2007.

IN WITNESS WHEREOF, the undersigned representative of the Members has executed these Articles of Organization this October 1, 2007.

  
Norman S. Weider, Esq.

Preparer:  
Norman S. Weider, Esq.  
100 S.E. 2d Street #3950  
Miami, FL 33131  
FLA Bar 150388

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**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, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: **CLIPSO CREATIONS, LLC**
2. The name and address of the registered agent and office is:

Norman S. Welder, Esq.  
100 S.E. 2<sup>nd</sup> Street  
Suite 3950  
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 PROPERTY AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Registered Agent

DATE:

10/1/07

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