Florida Department of State

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : THE FLORIDA COMPANY

Account Number : 120060000001

Phone

: (608)827-5300

Fax Number

; (608)824-0405

AL

ORIDA/FOREIGN LIMITED LIABILITY CO.

DOBROSLAV IMT LLC

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ARTICLES OF ORGANIZATION OF DOBROSLAV IMT LLC

ARTICLE I

NAME

The name of the limited liability company shall be: DOBROSLAV IMT LLC

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 22615 SW 66th Ave. Apt 309, Boca Raton, Florida 33428.

ARTICLE III

INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Business Filings Incorporated, 1203 Governors Square Blvd, Suite 101, Tallahassee, Florida 32301-2960. Liquid the County of Leon.

ARTICLE IV

DURATION

The duration for the limited liability company shall be: 12/31/2047.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the names and addresses of the members of the Limited Liability Company are:

Mikhail Slavin, 22615 SW 66th Ave. Apt 309, Boca Raton, Florida 33428 Aleksandr Dobrovan, 22615 SW 66th Ave. Apt 309, Boca Raton, Florida 33428

The Florida Incorporating Company, Organizer

Mark Williams, Asst. Vice President.

Authorized Representative

Prepared by Mark Williams, A.V.P., The Florida Incorporating Company, 8040 Excelsion

Dr., Suite 200, Madison, WI 53717

(608) 827-5300

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FILED

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED 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.

The name of the limited liability company is: DOBROSLAV IMT LLC

The name and address of the registered agent and office is Business Filings Incorporated, 1203 Governors Square Blvd, Suite 101, Tallahassee, Florida 32301-2960. Located in the County of Leon.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature:

Mark Williams, Asst. Vice President Business Filings Incorporated Date: Tuesday, October

CRETARY OF STATE LAHASSEE, FLORID