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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Rosa Wong, Paralegal

Account Name : AKERMAN SENTERFITT (MIAMI)

Account Number: 075471001363 Phone

: (305)374-5600

Fax Number

: (305)374-5095

## FLORIDA/FOREIGN LIMITED LIABILITY CO.

#### LIVING PROOF LLC

Certificate of Status	D
Certified Copy	1
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# ARTICLES OF ORGANIZATION OF LIVING PROOF LLC

ARTICLE I: - Name

The name of the Limited Liability Company is Living Proof LLC

ARTICLE II: - Address

The mailing address and street address of the principal office of the Limited Liability Company is:

2441 NE 26 Avenue Fort Lauderdale, FL 33305

ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature The name and the Florida street address of the registered agent are:

Peter Evans 2441 NE 26 Avenue Fort Lauderdale, FL 33305

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 camply 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.

Peter, Evans, Registered Agent

ARTICLE IV: - Management

The Limited Liability Company is to be managed by one Member or more Members and is, therefore, a member - managed company.

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TALLAHASSEE, FLORIDA

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## ARTICLE V: - Manager(s) or Managing Member(s)

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

**MGRM** 

Peter Evans 2441 NE 26 Avenue Fort Landerdale, FL 33305

Peter Evans, Member

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Peter Eyans
Typed or printed name of signes

2008 OCT 13 A 7 50 SECRETARY OF STATE

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