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

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.

dmg 2, llc

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**ARTICLES OF ORGANIZATION
OF**

DMG 2, LLC

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I—Name:

The name of the Limited Liability Company is:

DMG 2, LLC

ARTICLE II—Address:

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

999 Brickell Avenue, Suite 401
Miami, FL 33131

ARTICLE III—Registered Agent, Registered Office and Registered:

The name and the Florida street address of the initial registered agent is:

David Greer
999 Brickell Avenue, Suite 401
Miami, FL 33131

ARTICLE IV—Management:

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

ARTICLE V—Officers:

The following persons are appointed to the offices set forth opposite their names to serve until their successors are appointed:

Manager Member
Manager Member

David Greer
Liza Perdomo

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ARTICLE V-DURATION OF COMPANY

The existence of this company shall be perpetual.

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this 5th day of December, 2008.

D-D L

(In accordance with section 608.403(3), Florida Statutes, the execution of this change constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

D-D L
David Greer

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STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the designation as Registered Agent to accept service of process for the above stated limited liability Company at the place designated in this statement. 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 of registered agent under Chapter 608, Florida Statutes.

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


Signature of Registered Agent

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