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Florida Department of State
Division of Corporations
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L. SELLERS

DEC 12 2008

EXAMINER

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

FLORIDA/FOREIGN LIMITED LIABILITY CO.

blam, llc

Certificate of Status	0
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**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY OF**

BLAM, LLC

ARTICLE I

The name of the Limited Liability Company shall: BLAM, LLC

ARTICLE II

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the Act.

ARTICLE III

The mailing address and street address of the principal office of the Limited Liability Company is: 9100 S. DADELAND BLVD., SUITE 1600, MIAMI, FL 33156.

ARTICLE IV

The name and the Florida street address of the registered agent: LESLIE ADLER, 9100 S. DADELAND BLVD., SUITE 1600, MIAMI, FL 33156.

ARTICLE V

The name of the Managing Member(s) of this Company shall be:

**MANAGING MEMBER
MILES BUNDER**

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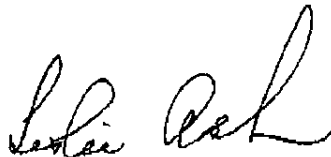
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**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED
OFFICE/MEMBER/REPRESENTATIVE**

BLAM, LLC
(Name of Company)

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization, 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.

Leslie Adler
Registered Agent



Signature of a member or an authorized representative of a 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.)

Leslie Adler
Typed or printed name of signee

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