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	FLORIDA/FOREIGN LIMITED LL Blade Products, LLC	ABILITY CO.
RECEIVED	Certificate of Status 1 Certificate of Status 1 Certified Copy 0 Page Count 02 Betimated Charge 9130	J. BRYAN Help FEB - 4 2009
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The name of the Limited Liability Company is: Blade Products, LLC ARTICLE II - Address The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: 180 NE 6tb Avenne, Unit N 180 NE 6th Avenne, Unit N Delray Beach, FL 33483 Delray Beach, FL 33483 ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature 0 The name and Florida street address of the registered agent are: David J. Latraverse	0270372009 9:43:29 AM	0500 POWERED BY ORCA	AFAX	PAGE 2	01	F 3
FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name The name of the Limited Liability Company is: ARTICLE II - Address The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: 180 NE 6th Avenue, Unit N Delray Beach, FL 33483 Delray Beach, FL 33483 Delray Beach, FL 33483 Office & Registered Agent's Signature The name and Florida street address of the registered agent are: David J. Latraverse		ARTICLES OF ORGAN	IZATION	H090000	24407	,
ARTICLE II - Registered Agent, Registered Office & Registered Agent's Signature The name and Florida street address of the registered agent are: David J, Latraverse		FOR				
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ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature	Delray Beach, FL 33483	Deiray J	Beach, FL 33483			•
Name (J 180 NE 6th Avenue, Unit N (P.O. Box or Mail Drop Box <u>NOT</u> Acceptable) Delray Beach, FL 33483		the registered agent are: David J. Latraverse Name 180 NE 6th Avenue, Unit (P.O. Box or Mail Drop Bo	N x <u>NOT</u> Acceptable)	;	-3 AM 8:	BIVISION OF CORPORATIONS

(City / State / Zip)

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 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.

Registered Agent's Signature - David J. Latraverse

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Page 1 of 2

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	er(s) or Managing Member(s): Th Manager or Managing Member is as follows:	H09000024407
litle: MGR" = Manager MGRM" = Managing Mem	<u>Name and Address:</u> b cr	
MGRM	David J. Latraverse - 180 NE 6th Avenue, Un	iit N, Delray Beach, FL 33483
MGRM	James G. Bennett - 3385 Lakeshore Drive, De	eerfield Beach, FL 33442
		<u> </u>
Use attachment if necessary)	
REQUIRED SIGNATUR		09 FEB
Sig	nature of a member of sattorized representative of a me	mber. EB WAR
docun	cordance with section 608.408(3), Florida Statutes, the enternation constitutes an affirmation under the penalties of perjuster are true.)	
	David J. Latraverse	ត្រ ក្រ
	Typed or printed name of signee	

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