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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CSH SERVICES, LLC

Account Number : I20070000160 Phone : (800)494-3124

Fax Number : (561)455-9985

CRETARY OF STATES

FORIDA/FOREIGN LIMITED LIABILITY CO.

STEPHEN SCHECKMAN LLC

| Certificate of Status | 0 |
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EXAMINER

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608,F.S.

ARTICLE I NAME

The name of the Limited Liability Company is: STEPHEN SCHECKMAN LLC

ARTICLE II ADDRESS

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

623 NEW YORK AVE ST CLOUD, FLORIDA 34769

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

The name and the Florida street address of the registered agent are

STEPHEN SCHECKMAN 623 NEW YORK AVE ST CLOUD, FLORIDA 34769

Having been named as registered agent 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 complywith 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..

x Rephir Schecken

STEPHEN SCHECKMAN / Registered Agent's signature

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STEPHEN SCHECKMAN LLC

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS (optional)

MANAGING MEMBER:

STEPHEN SCHECKMAN

623 NEW YORK AVE

ST CLOUD, FLORIDA 34769

2009 AY IL AM 8: 26
SECTETARY OF STATE
TALL THAT ASSEE, FLORID.

x ttephen Scheckman

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.

STEPHEN SCHECKMAN

Typed or printed name of signee