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	To: Division of Corporations Fax Number : (850)617-6383 From: EXAMINER
	From: Account Name : LATHAM, SHUKER, EDEN & BEAUDINE, LLP Account Number : I2000000025 Phone : (407)481-5800 Fax Number : (407)481-5801
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ARTICLES OF ORGANIZATION OF <u>APPSALIVE, LLC</u>

The undersigned, being desirous of forming a limited liability company pursuant to Chapter 608, Florida Statutes, hereby certifies as follows:

1. Name of Limited Liability Company. The name of the limited liability company is APPSALIVE, LLC, a Florida limited liability company (the "Company").

2. **Period of Duration.** The period of duration for the Company shall be perpetual.

3. **Principal Office.** The principal and mailing address of the company shall be 2123 W. Vina Del Mar Blvd., St. Petersburg Beach, FL 33706.

4. Agent for Service of Process; Address of Registered Agent. The initial registered agent of the Company for service of process shall be LSEB Agent Services, Inc., 390 North Orange Avenue, Suite 600, Orlando, Florida 32801, Attention: President.

5. Management. The Company shall be member managed.

IN WITNESS WHEREOF, the undersigned has executed the Articles of Organization on this ///// day of March, 2009, in her capacity as an authorized representative of the Company.

Carol Henderson

as Authorized Representative



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LATHAM SHUKER EDEN

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ACCEPTANCE BY APPOINTMENT

The undersigned, LSEB Agent Services, Inc., a Florida corporation, hereby acknowledges and accepts its appointment as registered agent of APPSALIVE, LLC, a Florida limited liability company (the "Company"), and agrees to act in that capacity and to comply with the provisions of the Florida Limited Liability Company act relative thereto. The undersigned is familiar with, and accepts, the obligations of a registered agent appointed as provided for in Chapter 608 of the Florida Statutes.

Dated as of this $13^{\text{#}}$ day of Margh, 2009.

LSEB Agent Services, Inc., a Plohida corporation

By:

THAM, President

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