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To:

Division of Corporations

Fax Number : (850) 617-6383

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

Phone : (305)634-3694 Fax Number : (305)633-9696

FLORIDA/FOREIGN LIMITED LIABILITY CO.

osiris, llc

Certificate of Status	0
Certified Copy	1
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Corporate Filing Menu

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EMPIRE CORP KIT

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June 10, 2009

EMPIRE

SUBJECT: OSIRIS, LLC REF: W09000027100

We received your electronically transmitted document. However, the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the dame as, or it is not distinguishable from the name of an existing entity of Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership of registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division s records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is P01000085758.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850): 245-6020.

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Tammi Cline Regulatory Specialist II FAX Aud. #: E09000139282 Letter Number: 709A00019457

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Ocipie et	RVICES, LLC
	d Liability Company," "L.L.C.," or "LLC.")
ARTICLE II - Address:	The state of the s
The mailing address and street address of t	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2903 Salzedo Street, 2nd Floor	2903 Salzedo Street, 2nd Floor
Coral Gables, FL 33134	Coral Gables, FL 33134.
	—————————————————————————————————————
ARTICLE III - Registered Agent, Regis	tered Office, & Registered Agent's Signature
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	<u> </u>
DESTROY OFFICE AND ROLL OF TOLION LABOURAGE.	m ^o A
The name and the Florida street address of	[the registered agent are: $r \sim c = r$.
Peter	J. Yanowitch SR 3
	Name S S
•	
2903 Salzed	o Street, 2nd Floor
Florida street address	s (P.O. Box <u>NOT</u> acceptable)
Coral Gables, FL 33	3134 _{FT.}
	tate, and Zip
Having been named as registered agent ar	nd to accept service of process for the above stated limited
	ed in this certificate, I hereby accept the appointment as
	pacity. I further agree to comply with the provisions of all
statutes relating to the proper and comple	ete 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.
_	/ \

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EMPIRE CORP KIT

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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"MGR" = Manager "MGRM" = Managing M	Name and Address: Sember
MGR	Peter J. Yanowitch
	2903 Selzedo Street, 2nd Floor Comi Gables, Fl 33134
·	
	ACC P
	-m
(Use attachment if necess	ary)
LE V: Effective date, if or	ther than the date of filing: (OPTIONAL)
LE V: Effective date, if or	ther than the date of filing: (OPTIONAL) Inter must be specific and cannot be more than five business days ng.)
LE V: Effective date, if or fective date is listed, the d	ther than the date of filing:
LE V: Effective date, if or fective date is listed, the days after the date of filin	ther than the date of filing:
LE V: Effective date, if or fective date is listed, the days after the date of filin REQUIRED SIGNATUI Signature (In accordant this description of this description is the date of this description is the description of this description is described.	ther than the date of filing: date must be specific and cannot be more than five business days ng.) RE:
LE V: Effective date, if or fective date is listed, the days after the date of filin REQUIRED SIGNATUI Signature (In accordant this description of this description is the date of this description is the description of this description is described.	ther than the date of filing:

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