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EXAMINER

SECRETARY OF STATE

CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 222-1173

FILING COVER SHEET ACCT. #FCA-14

CONTACT:

KATIE WONSCH

DATE:

06/25/09

REF. #:

000438.106332

CORP. NAME: <u>INTERNATIONAL TOP TM, LLC</u>

() ANNUAL REPORT	() ARTICLES OF AMENDMENT () TRADEMARK/SERVICE MARK () LIMITED PARTNERSHIP () MERGER	() FICTITIOUS NAME						
() OTHER:								
STATE FEES PREPAID WITH CHECK# 530765 FOR \$ 155 AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:								
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Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	nited Liability	Company	is:				AN MA
	Inte	emational T	op TM, LLC	:			St.
(Must	and with the wor	rds "Limited Lie	bility Compan	y, "LLC," or	LLC.)		
ARTICLE II - Add The mailing address		dress of the	principal o	ffice of the l	Limited :	Liability Co	ompany is:
rincipal Office Ad	dress:		Mailin	g Aððress:			
3350 NW Boca Raton Blvd		3350 NW Boca Raton Blvd				, ,	
Sulte	Sulte B38			Sul	te B38		_
Boca Raton	FL 33	3431	Bo	ca Raton	FL	33431	
The Limited Liability Com	pany cannot serv	e se its own Re	red Office, gistered Agent.	& Registere You must desig	ed Agen grato so inc	t's Signatu lividud or succi	re: her
The Limited Liability Combusiness entity with an act	many cannot servite Florida registr	e as its own Re- ration.)	gistered Agent. e registered	You must design	ed Agen gusto ao Inc	t's Signatu Gylduul or encil	rei her .
The Limited Liability Combusiness entity with an act	many cannot servite Florida registr	e as its own Re ration.) ddress of th	gistered Agent. e registered Research,	You must design	ed Agen gusto sa Inc	t's Signatu lividnei or anoti	re: her .
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The Limited Liability Combusiness entity with an act	pany cannot servive Florida registr orida street an Nationa	e is its own Re- retion.) ddress of the Reporate Nar 515 East P Florida street of the content	e registered Research, ne rark Avenue address (P.O.	You must design agent are: Ltd., inc.	gusto an Inc	t's Signatu fiyidnei or enod	re: her .
The Limited Liability Combusiness entity with an act The name and the Pla	pany cannot servive Florida registr orida street an Nationa	e is its own Re- retion.) ddress of the Reporate Nar 515 East P Florida street of the content	e registered Research, ne	You must design agent are: Ltd., inc. Box NOT acc	gusto an Inc	t's Signatu lividuel or anou	re: her .

Registered Agent's Signature (REQUIRHD)

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

<u>Tide:</u> "MGR" = Mana; "MGRM" = Mar		Name and Address:						
MGRM		Sasson	Moulavi					
		591 Phil	591 Phillips Dr.					
		Boca Raton	FL	33432				
MGRM		Richard	Richard Kayne					
<u> </u>		5613 NW 38	5613 NW 39th Avenue					
		Boca Raton	FL.	33432				
			<u> </u>					
			_ _					
								
			<u>·</u>					
(Use attachment ARTICLE V: Effective (If an effective date is lis to or 90 days after the d	date, if other than the	e date of filing: be specific and cannot be mo	re than f	(OPTIONAL) ive business days prio				
<u>requirkd</u> si	GNATURE:							
	Cur							
	Signature of a memi	per or an authorized representati	ve of a me	mber.				
	(In accordance with a	section 608.408(3), Florida Statutes stitutes an affirmation under the pe	, the execu	tion.				
•	SASSON	MOUCHY Typed or printed name of signee						
Filing Fees		•		•				

\$125.00 Filing Pee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)