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To:

Division of Corporations

Fax Number : (850)617-6383

Account Name : AKERMAN SENTERFITT (FT. LAUDERDALE)

Account Number : Il9980000010

Phone : (954)463-2700

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

HANNAH ZIER LLC

Certificate of Status	0
Certified Copy	1
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D. BRUCE

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ARTICLES OF ORGANIZATION OF HANNAH ZIER LLC (a Florida limited liability company)

ARTICLE I NAME

The name of the limited liability company (the "Company") is: HANNAH ZIER LLC

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Company are: 150 South Pine Island Road, Suite 300, Planation, FL 33324.

ARTICLE III DURATION

The period of duration for the Company shall begin on the date of filing these Articles of Organization with the Florida Secretary of State and shall have a perpetual existence and duration, until terminated in accordance with applicable law.

ARTICLE IV <u>INITIAL REGISTERED</u> OFFICE AND AGENT

The name and street address of the Company's initial registered agent are: Hannah Masimore, 150 South Pine Island Road, Suite 300, Plantation, FL 33324.

[Signature on the following page]

JUL -1 AH 9: 58

06-30-2009 05:12PM FROM-AKERMAN SENTERFITT

954-759-8911

T-966 P.003/004 F-955

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IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 30 day of _______, 2009.

Hannah Masimore

Member

SECHETARY OF STATE

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CERTIFICATE OF ACCEPTANCE BY REGISTERED AGENT

Pursuant to the provisions of the Florida Limited Liability Company Act, the undersigned submits the following statement in accepting the designation as registered agent of HANNAH ZIER LLC, a Florida limited liability company (the "Company"), in the Company's Articles of Organization:

Having been named as registered agent and to accept service of process for the Company at the registered office designated in the Company's Articles of Organization, the undersigned accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of her duties, and the undersigned is familiar with and accepts the obligations of her position as registered agent.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Acceptance this 30 day of ______ 2009.

09 JUL - I AM 9: 58
SECRETARY OF STATE