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SECRETARY OF STATE
TAIL AHASSEE, FLORID.

FILED

June 23, 2009

Department of State Division of Corporations Corporate Filings P O Box 6327 Tallahassee, FL 32314

Dear Sir or Madam:

Enclosed is a check for \$155 to cover the formation of DZGW LLC

Please send the certified copy to: DROR ZANANI, 324 SERINA COVE, DESTIN, FL 32541

Thank you for your cooperation.

Very truly yours,

# PJUL -7 PH 4

### ARTICLES OF ORGANIZATION OF DZGW LLC

#### Article I Name

The name of the limited liability company is: DZGW LLC.

#### Article II Principal Office

The principal place of business of this Limited Liability Company shall be: 324 SERINA COVE, DESTIN, FL 32541

#### Article III Mailing Address

The mailing address of this business 324 SERINA COVE, DESTIN, FL 32541

#### Article IV Initial Registered Agent & Street Address

The name and address of the initial registered agent is: DROR ZANANI, 324 SERINA COVE, DESTIN, FL 32541

#### Article V Duration

The duration of this Limited Liability Company shall be 12/31/2044

#### Article VI Managers/Members

The management of this Limited Liability Company is reserved for the member and the name and address of the members are:

DROR ZANANI 324 SERINA COVE DESTIN, FL 32541

GEORGE L. WARD 179 MIAMI STREET

MIRAMAR BEACH, FL 32550

#### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/ REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF SEED STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT OF STATE OF FLORIDA.

The name of the limited liability company is: DZGW LLC

The name and address of the registered agent and office is DROR ZANANI, 324 SERINA COVE, DESTIN, FL 32541

Having been named as registered agent and to accept service for the above stated 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 comply with 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.

Signature DA

DROR ZANANI