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From: Account Name : RUDEN, MCCLOSKY, SMITH, \$CHUSTER Account Number : 076077000521 Phone : (954)527-2428 Fax Number : (954)333-4001	& RUSSELL, P.A.
FLORIDA/FOREIGN LIMITED LIABILITY CO.	
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08-10-09 04:33pm From-RUDEN McCLOSKY FTL

ARTICLES OF ORGANIZATION OF MORABILITY, LLC a Florida Limited Liability Company

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

1. NAME. The name of the Limited Liability Company is MORABILITY, LLC (the "Company").

2. MAILING AND STREET ADDRESS OF PRINCIPAL OFFICE. The mailing and street address for the Company is: 1253 Manor Drive South, Weston, Florida 33326.

3. **REGISTERED AGENT**. The name and address of the initial registered agent in the State of Florida, whose Consent to Appointment as Registered Agent accompanies these Articles of Organization, is: Harry M. Rosen, 1253 Manor Drive South, Weston, Florida 33326.

The undersigned has executed these Articles of Organization on the 10^{th} day of August,

2009.

By Marry M. Rosen, Authorized Representative

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RM.66911971

08-10-09 04:33pm From-RUDEN McCLOSKY FTL 9547644996 T-176 P.03/03 F-799

CERTIFICATION OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: MORABILITY, LLC.

2. The name and address of the registered agent and office is:

> Harry M. Rosen 1253 Manor Drive South Weston, Florida 33326

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in its 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.

sen, Registered Agent

August 10, (Date) 2009



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