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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305) 634-3694

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

newco management conmpany limited, llc

| Certificate of Status | 0 |
|-----------------------|----------|
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EMPIRE CORP KIT

November 12, 2009

FLORIDA DEPARTMENT OF STATE
Division of Corporations

EMPIRE

SUBJECT: NEWCO MANAGEMENT COMPANY LIMITED, LLC

REF: W09000049887

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name of the entity cannot include "LIMITED." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

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.

Tammi Cline Regulatory Specialist II FAX Aud. #: E09000238945 Letter Number: 509A00035325

P.O BOX 6327 - Tallahassee, Flonda 32314

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ARTICLES OF ORGANIZATION OF

Newco Management Company, LLC

The undersigned members of these Articles of Organization hereby form a limited liability company pursuant to FLORIDA STATUTES §608 et. seq., as amended:

ARTICLE I - NAME OF THE COMPANY

The limited liability company shall be known as: Newco Management Company, LLC

ARTICLE II - MAILING AND STREET ADDRESS

The mailing and street address of the limited liability company shall c/o John T. Paxman, P.A., 1832 North Dixie Highway, Lake Worth, Plorida 33460.

ARTICLE III - REGISTERED AGENT

The registered agent and registered office of the limited liability company shall be: John T. Pagnard

P.A., 1832 North Dixie Highway, Lake Worth, Florida 33460.

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 this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and at am familiar with and accept the obligations of my position as registered agent as provided for in FLOTURA STATUTES \$608 et. seq.

John T. Raxman, Registered Agent

ARTICLE IV - INITIAL MANAGER

The initial Manager shall be Michael Grant, 1832 North Dixie Highway, Lake Worth, Florida 33460.

ARTICLE V - MANAGEMENT

The limited liability company is to be manager managed company.

In accordance with FLORIDA STATUTES §608.408(3), the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

John T. Paxman, Organizer

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