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T. HAMPTON

JUL 13 2010

EXAMINER

**WALTER R. BLAKE, P.A.  
COLONIAL BANK BUILDING  
9600 WEST SAMPLE ROAD, SUITE 304  
CORAL SPRINGS, FL 33065**

WALTER R. BLAKE, ESQ.  
President

Telephone 954-752-5252  
Fax 954-752-7960

July 9, 2010

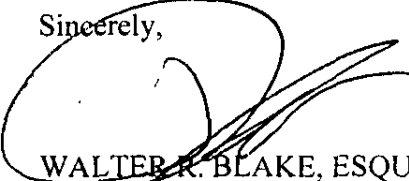
State of Florida  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

RE: LIMITED LIABILITY COMPANY—LIQUIDOMES, LLC

Gentlemen:

Original Articles and Designation of Resident Agent are attached along with a check for \$155.00. Please file the above and return to me a certified copy of the Articles of Organization. Thank you.

Sincerely,



WALTER R. BLAKE, ESQUIRE

# ARTICLES OF ORGANIZATION

OF

LIQUIDOMES, LLC

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, sets forth the following for the purpose of forming a limited liability company under the laws of the State of Florida.

## ARTICLE I - NAME

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

## ARTICLE II-ADDRESS OF PRINCIPAL OFFICE

The mailing address and street address of the principal office of the limited liability company is: 7401 Wiles Road, Suite 329, Coral Springs, Florida 33067.

## ARTICLE III-NAME AND ADDRESS OF REGISTERED AGENT

The name and street address of the initial registered agent in Florida for the limited liability company is:

Robert Urbanek  
7401 Wiles Road—Suite 329  
Coral Springs, Florida 33067

## ARTICLE IV-PERIOD OF DURATION

The period of duration of the limited liability company shall be perpetual.

## ARTICLE V-PURPOSE

The purpose for which the limited liability company is organized is to engage in any and all businesses and activities permitted by the laws of the State of Florida. The limited liability company shall have all of the powers vested in a limited liability company organized and existing by virtue of such laws.

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## ARTICLE VI-MANAGEMENT

The limited liability company is to be managed by one or more managers. The name and address of the manager who is to serve as manager until the first annual meeting of members or until his successor is elected and qualified is as follows:

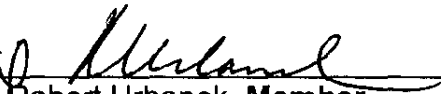
Robert Urbanek  
7401 Wiles Road—Suite 329  
Coral Springs, Florida 33067

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

Executed on this 9<sup>th</sup> day of July, 2010 by the undersigned member of

LIQUIDOMES, LLC.

BY:

  
Robert Urbanek, Member

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**STATEMENT DESIGNATING REGISTERED AGENT AND OFFICE**  
**STATE OF FLORIDA, COUNTY OF BROWARD**

Pursuant to the provisions of Section 608.415 and 608.407(1)(c) of the Florida Limited Liability Company Act, the limited liability company identified below submits the following statement in designating its registered office and registered agent in the State of Florida:

1. The name of the limited liability company is:

LIQUIDOMES, LLC

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

**ROBERT URBANEK**  
**7401 WILES ROAD, SUITE 329, CORAL SPRINGS, FLORIDA 33067**

LIQUIDOMES, LLC

BY:   
**ROBERT URBANEK, RESIDENT AGENT**

This statement is to acknowledge that, as indicated above, Liquidomes, LLC has appointed me, ROBERT URBANEK, as its registered agent to accept service of process for the company at the place designated above in this certificate. I accept this 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.

  
**Robert Urbanek**

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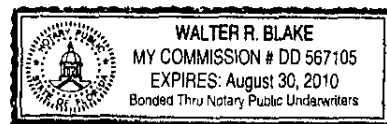
Date: July 9, 2010

STATE OF FLORIDA  
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this 9 day of July, 2010, by Robert Urbanek, agent on behalf of Liquidomes, LLC, a limited liability company. Robert Urbanek is personally known to me.

  
NOTARY PUBLIC

My Commission Expires:



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