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To: Division of Corporations : (850)617-6383 Fax Number From: : CSH SERVICES, LLC Account Name Account Number : 120070000160 : (800)494-3124 : (561)455-9885 Fax Number ep the email address for this business entity to be used for future; annual report mailings. Enter only one email address please. *

FLORIDA LIMITED LIABILITY CO.

Resins Enhancements LLC

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compilance with Chapter 608 and/or 621,F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

RESINS ENHANCEMENTS LLC

ARTICLE II ADDRESS

The malling address and street address of the principal office graphe ເປັນ Limited Liability Company is:

515 MIRASOL CIRCLE SUITE 206 CELEBRATION, FLORIDA 34747

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

The name and the Florida street address of the registered agent are:

DR. FRANK SCOTT
515 MIRASOL CIRCLE SUITE 206
CELEBRATION, FLORIDA 34747

Having been named as registered agent 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 I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

DIA FRANK SCOTT / Registered Agent's signature

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RESINS ENHANCEMENTS LLC

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS (optional)

MANAGING MEMBER
DR. FRANK SCOTT
515 MIRASOL CIRCLE SUITE 206
CELEBRATION, FLORIDA 34747

MANAGING MEMBER
HENRY V. LIONE
5233 HAMMOCK CIRCLE
SAINT CLOUD, FLORIDA 34771

2011 APR 12 AM 8:53
SECRETARY OF STATE TALL AHASSEF FLORIDA

Signature of a member or an authorized representative of a member (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.

PRNITED NAME OF SIGNEE

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