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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Email Address:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

Phone : (305) 634-3694

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FLORIDA LIMITED LIABILITY CO. WESTON VIDA, LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF

WESTON VIDA, LLC

ARTICLE I

The name of the Limited Liability Company shall be:

WESTON VIDA, LLC

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the Act.

ARTICLE III

The mailing address and street address of the principal office of the Limited Liability Company:

c/o 2900 NW 35th STREET MIAMI, FL 33142

ARTICLE IV

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

THOMAS PARKER c/o 2900 NW 35th STREET MIAMI, FL 33142

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE/MEMBER/REPRESENTATIVE

WESTON VIDA, LLC

(Name of Company)

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization, 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.

THOMAS PANKER

Registered Agent

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.)

Typed or printed name of signee

THOMAS PARKER

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