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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 LIMITED LIABILITY CO.  
SENBAC LLC**

Certificate of Status	0
Certified Copy	1
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**ARTICLES OF ORGANIZATION FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I**

**Name**

The name of the Limited Liability Company is:

SENBAC LLC

**ARTICLE II**

**Address**

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

16375 NE 18<sup>th</sup> Avenue, Suite 300  
North Miami Beach, FL 33162

**ARTICLE III**

**Registered Agent, Registered Office & Registered Agent's Signature**

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

Ira R. Shapiro  
16375 NE 18<sup>th</sup> Avenue, Suite 225  
North Miami Beach, FL 33162

*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 I am familiar with and accept the obligations of my position as Registered Agent.*

  
Ira R. Shapiro, Registered Agent

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ARTICLE IV  
Management

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The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager - managed company. The names of the managers are as follows:

Ann J. Gordon  
16375 NE 18<sup>th</sup> Avenue, Suite 300  
North Miami Beach, FL 33162

  
ANN J. GORDON, Manager

Date: May 16, 2011

*(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.)*

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