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CORPORATE FILING SERVICE

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| CORPORATION NAME(S) & DOCUME | ENT NUMBER(S), (| (if known): |
| 1. CARY SG TA (Corporation Name) | (Document #) | NTS, LLC |
| 2. (Corporation Name) | (Document #) | |
| 3. (Corporation Name) | (Document #) | · · · · · · · · · · · · · · · · · · · |
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| NEW FILINGS Profit Not for Profit Limited Liability Domestication Other | AMENDMENTS Amendment Resignation of Change of Reg Dissolution/W Merger | |
| OTHER FILINGS Annual Report Fictitious Name | REGISTRATION Foreign Limited Partne Reinstatement Trademark Other | |
| CR2E031(7/97) | | Examiner's Initials |

EFFECTIVE DATE 8 8 204

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I Name:
The Name of the Limited Liability Company is:

Cary SG Investments , LLC.

ARTICLE II - Address:

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

1890 South Ocean Dr. # 805-E Hallandale , Florida 33009

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

Caridad Saad

The name and the Florida Street Address of the registered agent are:

Caridad Saad **Name**

> 1890 South Ocean Dr. # 805-E Hallandale Florida 33009 Address Not Acceptable P.O.Box

> > Hallandale, Florida 33009

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 as provided for in Chapter 608, F.S..

Registerd Agent's Signature

ARTICLE IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, Therefore, a manager - managed company.

Member - Manager - Caridad Saad

(An additional article must be added if an effective date is requested) 08/08/11

Caridad Saad

Signature of 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.

Caridad Saad