

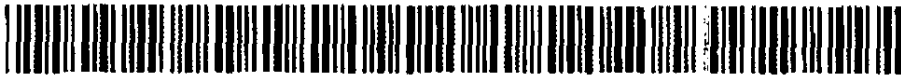
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**Florida Department of State**  
**Division of Corporations**  
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To:

Division of Corporations  
 Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY  
 Account Number : 072450003255  
 Phone : (305) 634-3694  
 Fax Number : (305) 633-9696

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.**  
**MONARCH KEY INVESTMENTS, LLC**

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 B. BOSTICK  
 OCT 10 2011

EXAMINER

**ARTICLES OF ORGANIZATION FOR  
FLORIDA LIMITED LIABILITY COMPANY OF**

**MONARCH KEY INVESTMENTS, LLC**

**ARTICLE I**

**The me of the Limited Liability Company shall:**

**MONARCH KEY INVESTMENTS, LLC**

**ARTICLE II**

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 is:

**2174 QUAIL ROOST DRIVE  
WESTON, FL 33327**

**ARTICLE IV**

**The name of the Manager (s) or Managing Member(s) shall be:**

**MANAGER  
ADAM G. WALKER  
2174 QUAIL ROOST DRIVE  
WESTON, FL 33327**

**ARTICLE V**

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

**ADAM G. WALKER  
2174 QUAIL ROOST DRIVE  
WESTON, FL 33327**

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

**MONARCH KEY INVESTMENTS, 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.



Signature of 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.)

**ADAM G. WALKER**

Typed or printed name of signee

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TALLAHASSEE, FLORIDA**