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CONTACT:	Kim Weiden	bach	S Company	
DATE:	<u>10/26/11</u>		, s	
<b>REF.</b> #:	000380.1562	<u>96</u>		
CORP. NAME:	LION VENT	TURES ENTERPRISES, LLC		
( ) ARTICLES OF INCO ( ) ANNUAL REPORT ( ) FOREIGN QUALIFIC ( ) REINSTATEMENT ( ) CERTIFICATE OF C ( ) OTHER:	CATION	( ) ARTICLES OF AMENDMENT ( ) TRADEMARK/SERVICE MARK ( ) LIMITED PARTNERSHIP ( ) MERGER	( ) ARTICLES OF DISSOLUTION ( ) FICTITIOUS NAME (XX) LIMITED LIABILITY ( ) WITHDRAWAL	
STATE FEES PREPAID WITH CHECK# 542005 FOR \$ 155.00 AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:				
COST LIMIT: \$				

( ) CERTIFICATE OF GOOD STANDING

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( ) CERTIFICATE OF STATUS

Examiner's Initials

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## ARTICLES OF ORGANIZATION OF LION VENTURES ENTERPRISES, LLC, A FLORIDA LIMITED LIABILITY COMPANY



### ARTICLE I. NAME

The name of the limited liability company is LION VENTURES ENTERPRISES, LLC (the "Limited Liability Company").

### ARTICLE II. ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is 10857 NW 84th Street, Doral, Florida 33178.

### ARTICLE III.

## REGISTERED AGENT, OFFICE AND REGISTERED AGENT'S SIGNATURE

The name and Florida street address of the Limited Liability Company's registered agent are as follows:

NRAI Services, Inc. 515 E. Park Avenue Tallahassee, FL 32301

Having been named as registered agent to accept service of process for the 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 of the Florida Statutes.

Katie Wonsch

Assistant Secretary

Date: October 21, 2011

### ARTICLE IV. MANAGEMENT

The Limited Liability Company shall be managed by its members. The name and addresses of the initial member of the Limited Liability Company are as follows:

Luis Delgado 10857 NW 84th Street Doral, Florida 33178

Signature of authorized representative of a member

Printed Name: Miguel A. Caputo, Authorized Representative

Date: October 21, 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.