Division of Corporations Electronic Filing Cover Sheet

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To:

Divinion of Corporations

Fax Number : (850)617-6383

From:

Account: Name : AKERMAN SENTERFITT (MIAMI)

Account Number : 075471001363 : (305)374-5600 Phone Fax Number ; (305)374-5095

**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. XENTILLC

Certificate of Status Certified Copy 02 Page Count Estimated Charge \$160.00

NOV -1 2011

EXAMINER

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ARTICLES OF ORGANIZATION OF XENTI LLC

ARTICLE I: - Name

The name of the Limited Liability Company is XENTI LLC

ARTICLE II; - Address

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

9880 NW 25 Street Doral, Florida 33172

ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature The name and the Florida street address of the registered agent are:

JAIR Electronics Corp. 9880 N.W. 25th Street Doral, FL 33172

Having been named as registered agent and to accept service of process for the above stated limited tiability 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 abligations of my position as registered agent as provided for in Chapter 608, F.S.

JAIR Electionics Corff., Registered Agent

Bv

ARTICLE IV: - Management

[X] The Limited Liability Company is to be managed by one Member or more Members and is, therefore, a member - managed company.

Lisa (. Landy, Authorized Signer

(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.)

Lisa A. Landy
Typed or printed name of signee

(22442759,1)