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To:

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

From:

Account Name : CSH SERVICES, LLC  
Account Number : I20070000160  
Phone : (800) 494-3124  
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FLORIDA LIMITED LIABILITY CO.  
BRENT BERMAN & ASSOCIATES LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
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**ARTICLES OF ORGANIZATION FOR A  
FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

**ARTICLE I NAME**

The name of the Limited Liability Company is:

BRENT BERMAN & ASSOCIATES LLC

**ARTICLE II ADDRESS**

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

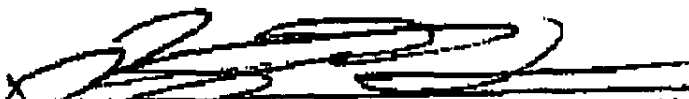
1200 BRICKELL AVE #1950  
MIAMI, FL 33131

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &  
REGISTERED AGENT SIGNATURE**

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

BRENT BERMAN  
815 EUCLID AVE # 2  
MIAMI, FL 33139

Having been named as registered agent 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.



BRENT BERMAN / Registered Agent's signature

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PAGE 2 BRENT BERMAN & ASSOCIATES LLC

**ARTICLE IV MANAGEMENT**


The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

**ARTICLE V MEMBERS (optional)**

MANAGING MEMBER  
BRENT BERMAN  
815 EUCLID AVE # 2  
MIAMI, FL 33139

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X   
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.

BRENT BERMAN