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| Certified Copies | _ Certificates | of Status |
| Special Instructions to I | Filing Officer: | |
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Office Use Only



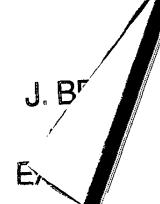
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SECRETARY OF STATE



COVER LETTER

| TO: Registration Section | |
|---|--|
| Division of Corporations | 1.00 prefer our la dancia. |
| SUBJECT: RESTATE, LLC | e de la companya de |
| | ted Liability Company |
| | |
| The enclosed Articles of Organization and fee(s) are | submitted for filing. |
| Please return all correspondence concerning this mat | ter to the following: |
| Mark C. Hanewich, Esq. | 超量 1 |
| | Name of Person |
| Tannenbaum Scro Hanev | vich & Alpert, P.L. |
| | Firm/Company |
| 1990 Main Street - Suite 7 | 25 |
| | Address |
| Canada Fladd 04000 | • |
| Sarasota, Florida 34236 | ty/State and Zip Code |
| k.valentin@rsindustries.org | y Claid and Exp Claid |
| E-mail address: (to be used | for future annual report notification) |
| For further information concerning this matter, pleas | e cail: |
| More C. Hannyich, For | 044 |
| Mark C. Hanewich, Esq. | at (941) 308-3155 Area Code & Daytime Telephone Number |
| Name of Ferson | Alea Code & Daytime Telephone Number |
| Enclosed is a check for the following amount: | |
| \$125.00 Filing Fee \$130.00 Filing Fee & | \$155.00 Filing Fee & \$160.00 Filing Fee, |
| Certificate of Status | Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed) |
| Mailing Address | Street/Courier Address |
| Registration Section | Registration Section |
| Division of Corporations P.O. Box 6327 | Division of Corporations Clifton Building |
| Tallahassee, FL 32314 | 2661 Executive Center Circle |

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANDAME. The name of the Limited Liability Company is: RESTATE, LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

| Main Street - Suite 725 |
|-------------------------|
| sota, Florida 34236 |
| |

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Tannenbaum Scro Hanewich & Alpert, P.L.

Name

1990 Main Street - Suite 725

Florida street address (P.O. Box NOT acceptable)

Sarasota _{FL} 3423

City, State, and Zip

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

ALCONOMICS OF THE PARTY OF THE

| <u>Title:</u> | Name and Address: |
|--|--|
| "MGR" = Manager | Name and Address: |
| "MGRM" = Managing Member | A CONTRACTOR OF THE PARTY OF TH |
| | ¥ |
| MGR | Alexander Kosachev |
| | Flat 94, Entrance 2039, Road 5717 |
| | 0257 Amwaj, Muharraq Governorate, Bahrain |
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| (Use attachment if necessary) | |
| | 400000 |
| ARTICLE V: Effective date, if other than the | date of filing: (OPTIONAL) |
| | e specific and cannot be more than five business days prio |
| to or 90 days after the date of filing.) | |
| | 1 |
| | . // / |
| REQUIRED SIGNATURE: | |
| | [V.] |
| . // | 1 Clar L |
| | |
| Signature of a member | er 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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

ALEXANDER KOSACHEV

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)