Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: EMPIRE CORPORATE KIT COMPANY Account Name

Account Number : 072450003255 Phone

: (305)634-3694

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FLORIDA LIMITED LIABILITY CO. **B VENTURES LLC**

Certificate of Status	0		
Certified Copy	1		
Page Count	03		
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EXAMINER

Electronic Filing Menu

Corporate Filing Menu

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7/5/2012

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-12 JUL -5 AM 8: 01

SEGRETARY OF STATE FALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I Name

The name of the Limited Liability Company is:

B VENTURES LLC

ARTICLE II Address

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

16375 NE 18th Avenue, Suite 330 North Miami Beach, FL 33162

ARTICLE III Registered Agent, Registered Office & Registered Agent's Signature

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

Stuart Bloom 16375 NE 18th Avenue, Suite 330 North Miami Beach, FL 33162

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 diales, and I am familiar with and accept the obligations of my position as Registered Agent.

Stuart Bloom, Registered Agent

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ARTICLE IS EGRETARY OF STATE Management ALLAHASSEE, FLORIDA

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager - managed company. The names of the managers are as follows:

Stuart Bloom 16375 NE 18th Avenue, Suite 330 North Miami Beach, FL 33162

Stuart Bloom, Manager

Date: 7/5 , 2012

(In accordance with Section 608,408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalities of perjury that the facts stated herein are true.)