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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305)634-3694
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FLORIDA LIMITED LIABILITY CO.
CREST MANAGEMENT LLC.

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**ARTICLES OF ORGANIZATION FOR 12 OCT -5 AM 8: 38
FLORIDA LIMITED LIABILITY COMPANY**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I

The Name of the Limited Liability Company shall be:

CREST MANAGEMENT LLC.

ARTICLE II

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the at.

ARTICLE III

The mailing address and street address of the principal office of the limited liability company is:

401 EAST LAS OLAS BLVD SUITE 130-251
FORT LAUDERDALE, FL 33301

ARTICLE IV

The name of the And Manager (S) shall be:

MGR

MARC J. BLOOM
401 EAST LAS OLAS BLVD SUITE 130-251
FORT LAUDERDALE, FL 33301

ARTICLE V

The name and Florida street address of the registered agent shall be:

MARC J. BLOOM
401 EAST LAS OLAS BLVD SUITE 130-251
FORT LAUDERDALE, FL 33301

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**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED
OFFICE/MEMBER/REPRESENTATIVE**

CREST MANAGEMENT LLC.

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.


Signature of Registered Agent


Signature of a member or an authorized representative of a member.

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TALLAHASSEE, FLORIDA

(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)

MARC J. BLOOM

Typed or printed name signee