Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number

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From:

Account Name

: CORPDIRECT AGENTS, INC.

Account Number : 110450000714 Phone

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ARTICLES OF ORGANIZATION OF 19 D'S, LLC

ARTICLE I. Name: The name of the Limited Liability Company is 19 D's, LLC (the "Company").

ARTICLE II. Address: The mailing address of the principal office of the Company is c/o Bonnie S. Miller CPA, 9050 Pines Boulevard, Suite 301, Pembroke Pines, FL 33024. The street address of the principal office of the Company is 9050 Pines Boulevard, Suite 301, Pembroke Pines, FL 33024.

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

Bonnie S. Miller 9050 Pines Boulevard, Suite 301 Pembroke Pines, FL 33024

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 am familiar with and accept the obligations of my position as registered agent as provided by Chapter 608, Florida Statutes.

Bonnie S. Miller

ARTICLE IV. Management: The Company is to be managed by one for more managers and is, therefore, a manager-managed company. The name and address of the initial managers are as follows:

Bonnie S. Miller 9050 Pines Boulevard, Suite 301 Pembroke Pines, FL 33024

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IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 30 day of Normani, 2012.

Bonnie S. Miller, Authorized Person

(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.)

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