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TO ACKROWLEDGE

SECRETARY OF STATE ALLAHASSEE, FLORID

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CORPORATE ACCESS, _

"When you need ACCESS to the world"

 $236\ East\ 6th\ Avenue\$. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

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1.	((C	JAMES WEORPORATE NAME AND D	ilner F	ine Art LLC		
2.	-(C	CORPORATE NAME AND D	OCUMENT #)			
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SPEC	CIAL II	NSTRUCTIONS:			• • • • • • • • • • • • • • • • • • • •	
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

James Wilner Fine Art Ll	C
	nited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address Principal Office Address:	of the principal office of the Limited Liability Company is Mailing Address:
The mailing address and street address	
The mailing address and street address Principal Office Address:	Mailing Address:

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

Paracorp Incorporated

Name

236 East 6th Avenue

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

Tallahassee

FL 32303

City, State, and Zip

SECRETARY OF STATE

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..

My Edward W. Noyer, ASST. Sec.

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member James Wilner MGR 8208 Caraway St Cabin JOhn, MD 20818 Ellen Wilner MGRM Same as Above (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: _ (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) REQUIRED SIGNATURE 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. 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.) James D. Wilner Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation

Filing Fees:

of Registered Agent
\$ 30,00 Certified Copy (Optional)
\$ 5,00 Certificate of Status (Optional)