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LIMITED LIABILITY COMPANY

Blue Unicorn Editions LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
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Electronic Filing Menu

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H990000 31066 6 ARTICLES OF ORGANIZATION

Blue Unicorn Editions LLC

ARTICLE I

NAME

The name of the limited liability company shall be: Blue Unicorn Editions LLC

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 1325 NW 9th Ave, Gainesville, Florida 32605. Located in County of US.

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ARTICLE III

INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Victor Celorio, 1325 NW 9th Ave, Gainesville, FL 32605. Located in the County of Alachua.

ARTICLE IV

DURATION

The duration for the limited liability company shall be: 12/31/2039

ARTICLE V

MANAGERS

The management of the limited liability company is reserved for the members and the name and address of the members of the Limited Liability Company is: Victor Celorio, 1325 Nw 9th Ave, Gainesville, FL 32605 Leslie Lambert, 1325 Nw 9th Ave, Gainesville, FL 32605

Prepared by Richard Oster, Business Filings, 8025 Excelsior Dr. Suite 200, Madison, WI 53717.

(608) 827-5300,

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: Blue Unicorn Editions LLC

The name and address of the registered agent and office is: : Victor Celorio, 1325 NW 9th Ave, Gainesville, FL 32605. Located in the County of Alachua.

Having been named as registered agent and to accept service of process for the above stated corporation 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.

Signature:

Victor Celerio

Date: 11/23/99

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