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Account Name : LEVINE & PARTNERS, P.A.  
Account Number : 074677001117  
Phone : (305) 372-1350  
Fax Number : (305) 372-1352

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Email Address:

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**FLORIDA PROFIT/NON PROFIT CORPORATION  
GFE MANAGEMENT, INC.**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 1       |
| Certified Copy        | 1       |
| Page Count            | 04      |
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**LEVINE & PARTNERS, P.A.**  
ATTORNEYS AT LAW

1110 BRICKELL AVENUE, SUITE 700  
MIAMI, FLORIDA 33131

Alan W. Levine, Esquire

TELEPHONE: (305) 372-1350 Ext. 112  
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E-MAIL: [awl@levinelawfirm.com](mailto:awl@levinelawfirm.com)

November 10, 2011

Florida Secretary of State  
Department of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

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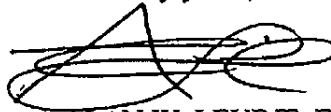
RE: GFE MANAGEMENT, INC.  
DOCUMENT NUMBER: N11000009520  
FILED: OCTOBER 7, 2011; DISSOLVED: NOVEMBER 8, 2011

To Whom It May Concern:

Please be advised that the above-referenced entity was inadvertently filed as a "not-for-profit" entity and was recently dissolved (see attached filed Articles of Dissolution). By this correspondence GFE Management, Inc. hereby releases the name and confirm they have no intention of reinstating the not-for-profit entity but instead wish to incorporate GFE Management, Inc., a Florida corporation, as evidenced by the attached Articles of Incorporation.

If you have any questions or comments regarding the foregoing, please do not hesitate to contact me.

Sincerely yours,



ALAN W. LEVINE, ESQ.

AWL/gr  
Enclosures

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**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**The name of the corporation shall be: **GFE MANAGEMENT, INC.****ARTICLE II PRINCIPAL OFFICE**Principal street address  
**1110 BRICKELL AVENUE**  
**SUITE 700**  
**MIAMI, FL 33131**

Mailing address, if different is:

**ARTICLE III PURPOSE**The purpose for which the corporation is organized is:  
**ANY LAWFUL PURPOSE****ARTICLE IV SHARES**The number of shares of stock is: **100****ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: **ROMAN K. JONES, PRESIDENT**  
Address: **1110 BRICKELL AVENUE**  
**SUITE 700**  
**MIAMI, FLORIDA 33131**Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_Name and Title: **VANESSA MENKES, VICE PRESIDENT**  
Address: **1110 BRICKELL AVENUE**  
**SUITE 700**  
**MIAMI, FLORIDA 33131**Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: **ALAN W. LEVINE, ESQUIRE**  
Address: **1110 BRICKELL AVE, SUITE 700**  
**MIAMI, FLORIDA 33131****ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: **ALAN W. LEVINE, ESQUIRE**  
Address: **1110 BRICKELL AVE, SUITE 700**  
**MIAMI, FLORIDA 33131***Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

Required Signature/Registered Agent

**NOVEMBER 10, 2011**

Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the 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.*

Required Signature/Incorporator

**NOVEMBER 10, 2011**

Date

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