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Division of Corporations

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From:

Account Name : SHUFFIELD LOWMAN Account Number : I20030000118 Phone : (407)581-9800 Fax Number : (407)581-9801

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: registeredagent@shuffieldlowman.com

FLORIDA LIMITED LIABILITY CO.

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Yintai MAFL LLC

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Help

The name of the Limited Liability	Company is:			
Yin	tai MAFL LLC			
(Must contai	in the words "Limited Liabilit	y Company, "L.L.C.," or "LI	.C.")	
ARTICLE II - Address: The mailing address and street add	dress of the principal office of	the Limited Liability Compa	any is:	
Principal	Office Address:	Maili	ing Address:	
	aple Dr. Suite 105 (ills, CA 90210	345 N. Maple Beverly Hills. (Dr. Suite 105 CA 90210	
DWICLE WY Desistand Agen	t Registered Office & Reg	istered Agent's Signature:		
(The Limited Liability Company c	annot serve as its own Regist		ate an individual or	
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CONTINUED)

Title:	Name and Address:	
"AMBR" Authorized Member		
"MGR" = Manager AMBR	Yintai Marianna LLC	
AIVIDIN	345 North Manle Drive, Suite 105	
	345 North Maple Drive, Suite 105 Beverly Hills, CA 90210	
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