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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 205-0383

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

bruce enterprises, llc

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION
OF
BRUCE ENTERPRISES, LLC

3

Article I. Name.

The name of the limited liability company is:

BRUCE ENTERPRISES, LLC

Article II. Address.

The mailing address and the street address of the principal office of the limited liability company is:


10445 S. W. 122nd Street
Miami, FL 33176

Article III. Registered Agent, Registered Office & Registered Agent's Signature.

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

Thomas P. Bruce
10445 S. W. 122nd Street
Miami, FL 33176

Having been named as registered agent 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 that 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 under Chapter 608, F.S.



Registered Agent's Signature

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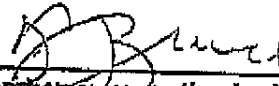
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Article IV. Management (check as applicable)

- The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager-managed company.
- The Limited Liability Company is to be managed by its members, and is therefore, a member-managed company.



 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.)



 THOMAS P. BRUCE,
 Authorized Representative of a Member of
 Typed or Printed Name of Signee

ag/brucer.ao2.wpd

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 AND
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