

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : LUSKY & MOTOLA, ESQ.

Account Number: 110331002052 Phone: (305)446-1245 Fax Number: (305)446-1205

F.E.C.F.IVE.D 12 AUG 15 AM 11: 55 VISION OF CORPORATION

LIMITED LIABILITY COMPANY

POINT TO POINT IMPORT & EXPORT, LLC

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02
\$125.00

02 AJG | 5 PM 3: 38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8/15/2002

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED

ARTICLE I: Name The name of the Limited Liability Company is:

POINT TO POINT IMPORT & EXPORT, L.L.C.

ARTICLE II Address: The mailing address and street address of the principal office of the Limited Liability Company is:

2025 NE 164th Street, Apt. 204, North Miami Beach, Florida 33162

ARTICLE III Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

Myrian T. Tissot 2025 NE 164th Street, Apt. 204, North Miami Beach, Florida 33162

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.

Myrian T. Tissot

Jeffrey Lusky, Esquire (Power of Attorney)

Article IV Management

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager managed company

> Signature of Member or Asthorized Representative Jeffrey Lusky, Esquire (Power of Attorney)

(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.)

> Myrian T. Tissot Typed or Printed Name of Signer

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