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From: Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY
LEAN PRODUCTIVITY SOLUTIONS, L.L.C.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY
Lean Productivity Solutions, L.L.C.

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Article I

The name of the Limited Liability Company is:

Lean Productivity Solutions, L.L.C.

Article II

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

**Mailing Address: 14650 SW 93rd Lane
Miami, Florida 33186**

**Street Address: 14650 SW 93rd Lane
Miami, Florida 33186**

Article III

The period of duration for the Limited Liability Company shall be:

For Thirty (30) years from the date of initial filing.

The Limited Liability Company shall dissolve no later than November, 2032.

Article IV

The Limited Liability Company is to be managed by a Chief Executive Manager and a Manager, the name(s) and address(es) of the Chief Executive Manager and Manager is/are:

<u>Chief Executive Manager and Manager</u>	<u>Address</u>
Stacy M. Da Costa	14650 SW 93rd Lane Miami, Florida 33186
Gessel R. Nunez	12385 SW 154 Terr Homestead, Florida 33032

Article V

The Limited Liability Company is organized by the following initial member(s), whose name and address is/are as follows:

<u>Member</u>	<u>Address</u>
Stacy M. Da Costa	14650 SW 93rd Lane Miami, Florida 33186
Gessel R. Nunez	12385 SW 154 Terr. Homestead, Florida 33032

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Article VI

Additional members may be admitted by the unanimous written consent of all members under the terms and conditions agreed to by all of the members.

Article VII

The undersigned member or authorized representative of a member of Lean Productivity Solutions, L.L.C. certifies:

1. the above named limited liability company has at least one member;
2. Each member shall make additional capital contributions to the company only on the unanimous consent of all the members.
3. No additional members shall be admitted to the company except by the unanimous written consent of all the members of the company and on such terms and conditions as shall be determined by all the members. A member may transfer his or her interest in the company as set forth in the operating agreement of the company.
4. The company shall be dissolved on the death, bankruptcy, or dissolution of a member or Chief Executive Chief Executive Manager, or on the occurrence of any other event that terminates the continued membership of a member in the company, as set forth in the operating.

(In accordance with Section 608.408(3), Florida Statutes, the execution of these articles constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

By:

Stacy M. Da Costa
Stacy M. Da Costa, Director

STATE OF FLORIDA

Ss:

COUNTY OF DADE

BEFORE ME, the undersigned authority, this 4 day of ~~September~~ ^{October}, 2002, personally appeared, Stacy M. Da Costa, to me well known to be the persons who executed the above and foregoing Articles of Organization of Lean Productivity Solutions, L.L.C., and who state that he executed the same for the purposes therein expressed.

SWORN TO AND SUBSCRIBED before me this 4 day of ~~September~~ ^{October}, 2002.

My Commission Expires:

By:

Denise Parrish
Denise Parrish
Notary Public



Denise Parrish
Commission # DD135898
Expires July 21, 2006
Bonded Thru
Atlantic Bonding Co., Inc.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

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1. The name of the limited liability company:

Lean Productivity Solutions, L.L.C.

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

Stacy M. Da Costa
14650 SW 93rd Lane
Miami, Florida 33186

Having been named 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 provision 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.

Stacy M. Da Costa
14650 SW 93rd Lane
Miami, Florida 33186

By: [Signature]
Stacy M. Da Costa

STATE OF FLORIDA

COUNTY OF DADE

Ss:

BEFORE ME, the undersigned authority, this 4 day of October, 2002, personally appeared, Stacy M. Da Costa to me well known to be the persons who executed the above and foregoing Articles of Organization of Lean Productivity Solutions, L.L.C., and who state that they executed the same for the purposes therein expressed.

SWORN TO AND SUBSCRIBED before me this 4 day of October, 2002.
My Commission Expires:

By: [Signature]
Denise Parrish
Notary Public

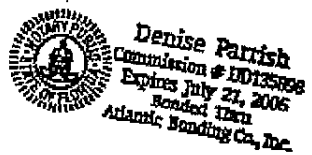


EXHIBIT 1

Managers

Name

Address

Stacy M. Da Costa
(Chief Executive Manager)

14650 SW 93rd Lane
Miami, FL 33186

Gessel R. Nunez
(Manager)

12385 SW 154th Terr
Homestead, FL 33032

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EXHIBIT 2

Members

Name

Address

Stacy M. Da Costa
(Chief Executive Manager)

14650 SW 93rd Lane
Miami, FL 33186

Gessel R. Nunez
(Manager)

12385 SW 154th Terr
Homestead, FL 33032