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(Requestor's Name)

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(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

\_\_\_\_\_  
(Business Entity Name)

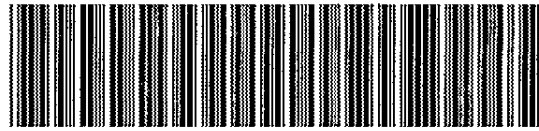
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SECTION 601.01  
TALLAHASSEE, FLORIDA

**GABRIEL E. MONTOYA**  
**4 Alhambra Circle, Coral Gables, FL 33134**

March 28, 2003

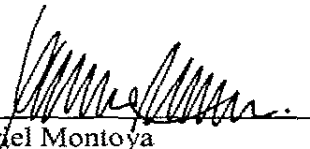
Department of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, FL 32399

**SUBJECT: Super Brix USA LLC**

Enclosed please find an original and one (1) copy of the Articles of Organization for the above-referenced corporation and our check in the amount of \$160.00, in payment of the Filing Fee, Designation of Registered Agent, Certified Copy and Certificate of Status.

Thank you for your assistance in this matter, we are

Very truly yours,

  
\_\_\_\_\_  
Gabriel Montoya  
4 Alhambra Circle, Coral Gables, FL 33134

03 APR -8 PM 12:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION**  
**OF**  
**SUPER BRIX USA LLC**

**ARTICLE I**

The name of the limited liability company (hereinafter called the "limited liability company") is Super Brix USA LLC.

**ARTICLE II**

The address of the principal office and the mailing address of the limited liability company is 4 Alhambra Circle # 2, Coral Gables, Florida 33134.

**ARTICLE III**

The period of duration for the limited liability company shall be perpetual.

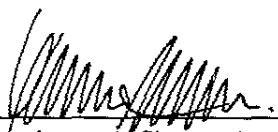
**ARTICLE IV**

The remaining members of the Company have the right to continue the business in the event of the termination of the Company at any time due to death, retirement, resignation, expulsion, bankruptcy, or dissolution of any member or the occurrence of any other event which terminates the continued membership of a member in the Company, provided that all of the remaining members agree to do so in writing within 120 days after the date of a member's termination of membership.

**ARTICLE V**

The name and the Florida street address of the registered agent and office are Gabriel E. Montoya, 4 Alhambra Circle # 2, Coral Gables, Florida 33134.

*Having been named as the 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.*

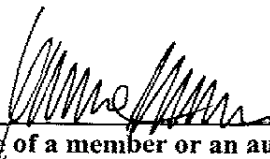
  
\_\_\_\_\_  
(Registered Agent's Signature)

Date: March 28, 2003

**ARTICLE VI**

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STATE  
TALLAHASSEE, FLORIDA

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

By:   
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.)

Gabriel E. Montoya  
Typed or printed name of signee

**FILING FEES:**  
\$100.00 Filing Fee for Articles of Organization  
\$ 25.00 Designation of Registered Agent  
\$ 30.00 Certified Copy (OPTIONAL)  
\$ 5.00 Certificate of Status (OPTIONAL)

FILED  
03 APR -8 PM 12:30  
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TALLAHASSEE, FLORIDA