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

From: Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305)599-0839  
Fax Number : (305)716-0346

LIMITED LIABILITY COMPANY

4518 INVESTMENTS L.L.C.

AL

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - Name:  
The name of the Limited Liability Company is:  
4518 INVESTMENTS L.L.C.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

2717 Ponce de Leon Boulevard  
Coral Gables, FL 33134

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Sergio de Varona, CPA  
Name  
304 Palermo Avenue  
Florida Street Address  
Coral Gables, FL 33134  
City, State, and Zip

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 in Chapter 608, F.S.

  
Registered Agent's Signature

FILED

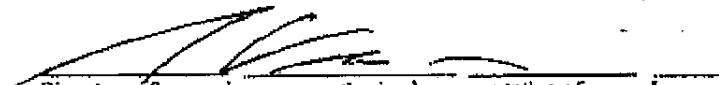
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ARTICLE IV – Management (Check if applicable)

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(An additional article must be added if an effective date is requested)

  
\_\_\_\_\_  
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)

Sergio de Varona  
\_\_\_\_\_  
Typed or printed name of signer

MEMBERS

ADDRESS

Luigi Spagnuolo

2717 Ponce de Leon Blvd.  
Coral Gables, FL 33134

Amalia Spagnuolo

2717 Ponce de Leon Blvd.  
Coral Gables, FL 33134