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SECRETARY OF STATE
TALLAHASSEE, FLORIDA.

N. Outlinen MAY 22 2006

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: FRANK N. BONUSO, LLC (Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
FRANK N. BONUSO (Name of Person)
FRANK N. BONUSO, LLC. (Firm/Company)
2450 NE 5/2T STREET #11
FT. LAUDERDALE, FLORIDA 333308 (City/State and Zip Code)
For further information concerning this matter, please call:
FRANK BONUSO at (954) 651 - 7277 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee & Certified Copy (additional copy is enclosed)} \$\text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)}
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
2450 NE 51 51 St. #11 2450 NE 51 STEPER 411 FT. HANDENDALE, FL 33308 FT. HANDENDALE, FL 33308
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
TRANK N. BONUSO ARE SON 55
Florida street address (P.O. Box NOT acceptable) FT. LAUDGEPAIF FL. 33388
Florida street address (P.O. Box NOT acceptable) FT. LAUDGEDALE FL 33308
FT. LAUDGEDAUF FL 33308 BAR & 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 for in Chapter 608, F.S

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

Title: "MGR" = Man. "MGRM" = M:	ager anaging Member	Name and Address:
MGRN	a	FRANK N. BONUSO 2450 NE GIST STREET # 1 FT. HOUDERDALE, FL 33308
(Use attachmer	nt if necessary)	
CLE V: Effective	re date, if other than th listed, the date must date of filing.)	ne date of filing: (OPTIONAL) be specific and cannot be more than five business days
CLE V: Effective ffective date is longer the	re date, if other than the listed, the date must date of filing.) SIGNATURE:	

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)