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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

FLORIDA/FOREIGN LIMITED LIABILITY CO.

integral solutions investors, l.l.c.

Certificate of Status	0
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J. BRYAN

FEB 12 2008

EXAMINER

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
OF
INTEGRAL SOLUTIONS INVESTORS, L.L.C.

The undersigned subscriber to these Articles of Incorporation, a natural person competent to contract, hereby forms a corporation under the laws of the State of Florida.

ARTICLE I

The name of the Limited Liability Company is: Integral Solutions Investors, L.L.C.

ARTICLE II

The mailing address and street address of the principal office of the Limited Liability Company is: 2701 Ponce de Leon Boulevard, Suite 202, Coral Gables, FL 33134.

ARTICLE III

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

Marga Iurman
2701 Ponce de Leon Boulevard, Suite 202
Coral Gables, FL 33134

ARTICLE IV

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

ARTICLE V

The name and address of each Manager or Managing Member is as follows:

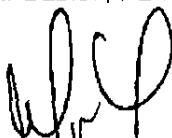
<u>Title</u>	<u>Name and Address</u>
Managing Member & Manager	Marga Iurman 2701 Ponce de Leon Boulevard, Suite 202 Coral Gables, FL 33134
Managing Member & Manager	Mauro Iurman c/o 2701 Ponce de Leon Boulevard, Suite 202 Coral Gables, FL 33134

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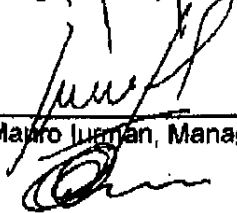
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Managing Member &
Manager

Henry Iurman
c/o 2701 Ponce de Leon Boulevard, Suite 202
Coral Gables, FL 33134



Marga Iurman, Manager



Mauro Iurman, Manager



Henry Iurman, Manager

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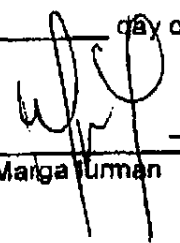
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**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE
FOR THE SERVICE OF PROCESS WITHIN THE STATE
OF FLORIDA, NAMING AN AGENT UPON
WHOM PROCESS MAY BE SERVED**

That INTEGRAL SOLUTIONS INVESTORS, L.L.C., desiring to qualify under the laws of the State of Florida, with its principal office at: 2701 Ponce de Leon Boulevard, Suite 202, Coral Gables, FL 33134, has named Marga Turman, as its agent to accept service of process within the State of Florida.

Having been named registered agent and to accept service of process for the above named limited liability company, at the place designated in the Articles of Organization and this Certificate, I hereby accept the appointment and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent provided in Chapter 608 F.S.

Dated this _____ day of _____



Marga Turman

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