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Florida Department of State
Division of Corporations
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Email Address: _____

FLORIDA LIMITED LIABILITY CO.
CM & CN SUPPORT SERVICES, L.L.C.

| | |
|-----------------------|----------|
| Certificate of Status | 1 |
| Certified Copy | 0 |
| Page Count | 0.3 |
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TALLAHASSEE, FLORIDA
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Second Report

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CM & CN Support Services L.L.C

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

4430 SW 83rd Avenue
Miami, FL 33155

1825 Ponce de Leon Blvd., Ste. 500
Coral Gables, FL 33134

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:

Joaquin A. Sosa

Name

4430 SW 83rd Avenue

Florida street address (P.O. Box NOT acceptable)

Miami

Florida

33155

City

State

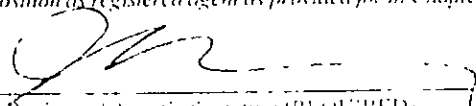
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Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. 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 605, F.S.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:
"AMBR" -- Authorized Member
"MGR" -- Manager

Name and Address:

MGR

Cecilia Munoz
1825 Ponce de Leon Blvd, Ste. 500 Jo Sosa
Coral Gables, FL 33134

MGR

Cecilia Munoz
1825 Ponce de Leon Blvd, Ste. 500 Jo Sosa
Coral Gables, FL 33134

AMBR

JAS LAW, LLC
1825 Ponce de Leon Blvd, Ste. 500
Coral Gables, FL 33134

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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing, _____ (OPTIONAL)


(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

JAS LAW, LLC has no ownership interest and it is listed for administration only.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Joaquin A. Sosa

Typed or printed name of signer

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)