

FROM : Lusky & Assoc.

PHONE NO. : 305 446 1205

May. 23 2000 08:52AM P1

Division of Corporations

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Florida Department of State

Division of Corporations

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To:

Division of Corporations

Fax Number : (850) 922-4003

From:

Account Name : JEFFREY LUSKY & ASSOCIATES, PA

Account Number : 110331002052

Phone : (305) 446-1245

Fax Number : (305) 446-1205

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LIMITED LIABILITY COMPANY

Silicon Beach Ventures, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

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TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED
LIABILITY COMPANY**

ARTICLE I: Name The name of the Limited Liability Company is:

Silicon Beach Ventures, LLC

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

1110 Brickell Avenue, Suite 800, Miami, FL 33133

ARTICLE III Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

Diego Nunez-Zambrano, 1110 Brickell Avenue, Suite 800, Miami, FL 33133

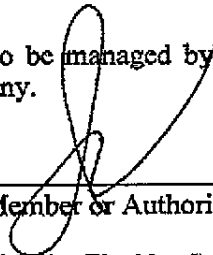
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all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



Registered Agent's Signature

Article IV Management

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



Signature of Member or Authorized Representative

(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.)

Diego Nunez-Zambrano

Typed or Printed Name of Signer

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