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COVER LETTER

MARIA ELISA LOPEZ 6301 COLLINS AVENUE SUITE 2506 MIAMI BEACH, FLORIDA 33141

(305) 861-8281 DAY TIME

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ON SEP 25 MM ID: 18

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

KASSIS INTERNATIONAL LTD.CO

ARTICLE II - Address:

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

6301 COLLINS AVENUE, SUITE 2605

MIAMI BEACH, FLORIDA 33141

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

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

MARIA ELISA LOPEZ		
Name		
6301 collins ave, suite 2506		
Florida street address (P.O. Box NOT acceptable)		
MIAMI BEACH FL 33141		
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..

Maria Eliza Hopes
Registered Agent's Signature

Article IV - Management	(Check box if applicable.
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The Limited Liability Company is to be managed by one manager or more managers and is therefore, a manager - managed company.

(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.)

MARIA E LOPEZ

Typed or printed name of signee

FILING FEES:

- \$ 100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (OPTIONAL)
- \$ 5.00 Certificate of Status (OPTIONAL)