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From:

Account Name : CORPORATE & CRIMINAL RESEARCH SERVICES
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LIMITED LIABILITY COMPANY
IMMUNE AWARENESS ASSOCIATES, LLC

Certificate of Status	0
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**ARTICLES OF ORGANIZATION OF
IMMUNE AWARENESS ASSOCIATES, LLC**

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I — Name:

The name of the Limited Liability Company is IMMUNE AWARENESS ASSOCIATES, LLC.

ARTICLE II — Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 9660 Coral Way, Miami, Florida 33165.

ARTICLE III — Duration:

The period of duration for the Limited Liability Company shall be perpetual.


ARTICLE IV — Management:

The Limited Liability Company will be a member-managed company.

ARTICLE V — Registered Agent:

The name of the registered agent for service of process in the state shall be CorpDirect Agents, and the street address of the initial registered office of this Limited Liability Company in the State of Florida is 103 North Meridian Street, Lower Level, Tallahassee, Florida 32301.

Dated: March 16, 2001.


Narette O'Donnell, Esq.,
Authorized Signatory

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

IMMUNE AWARENESS ASSOCIATES, LLC.

2. The name and address of the registered agent and office is:

CORPDIRECT AGENTS
103 North Meridian Street
Lower Level
Tallahassee, Florida 32301

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, the undersigned hereby accepts the appointment as registered agent and agree to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and the undersigned is am familiar with and accept the obligations of its position as registered agent.

CORPDIRECT AGENTS

By: Pam Wolfe
Print Name: Pam Wolfe
Print Title It's Agent

Dated: 3-16-01 2001