

Florida Department of State

Division of Corporations
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To:

Division of Corporations

Fax Number : (850)205-0383

Excon.

Account Name : INTERNATIONAL COMPANY SERVICES (USA) LLC

Account Number : I20010000074
Phone : (954)943-1498
Fax Number : (954)943-1499

LIMITED LIABILITY COMPANY

PAPI, LLC

Certificate of Status	0
Certified Copy	1
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05/08/01 09:56 Fl Dept of State p1 /1



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

May 8, 2001

INTERNATIONAL COMPANY SERVICES (USA) LLC

SUBJECT: P A P I, LLC REF: W01000010346

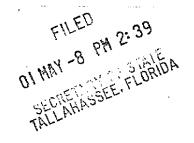
We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please specify which way your company is to be managed. Articles TV & V both state the company is to be managed by the members and managers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6094.

Agnes Lunt Document Specialist FAX Aud. #: H01000063844 Letter Number: 101A00027495



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PAPI, LLC

ARTICLE II - Address:

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

1591 East Atlantic Blvd. Suite 200 Pompano Beach, Florida 33060

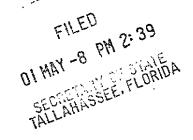
ARTICLE III Registered Office & Registered Agent's Signature:

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

Carlton Management, Inc. 1591 East Atlantic Blvd. Suite 200 Pompano Beach, Florida 33060

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 - Members:

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Pierre Viallant 201 Angler Ave. Palm Beach, Fl 33480 Patrick Gimenez 507 SE Mizner Blvd. Boca Raton, Fl 33432

Signature of a member of 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.)

Carlton Management Inc.

Typed or printed name of signee