Division of Corporations

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Florida Department of State

Division of Corporations
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Account Name : EMFIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone: (305)634-3694

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LIMITED LIABILITY COMPANY

KAB GROUP, LLC

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Certificate of Status	0
Certified Copy	1
Page Count	06
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June 26, 2001

EMPIRE

SUBJECT: KAB GROUP, LLC

REF: W01000014829

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.

Any reference to this entity being a corporation must be removed from the document.

The document must contain both the street address of the principal office and the mailing address of the entity.

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Shawn Logan Document Specialist

FAX Aud. #: H01000076443 Letter Number: 601A00038624

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

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ARTICLES OF ORGANIZATION OF

KAB GROUP, LLC

The undersigned member(s) to these Articles of Organization hereby form a limited liability company under the laws of the State of Florida.

ARTICLE NAME OF THE COMPANY

The name of this company shall be: KAB GROUP, LLC.

ARTICLE FURPOSES/NATURE OF BUSINESS

The general nature of the business to be transacted by this limited liability company is any activity and/or business permitted under the laws of the United States and of the State of Florida.

ARTICLE III TERM OF EXISTENCE

This limited liability company shall have perpetual existence.

ARTICLE MAILING ADDRESS OF COMPANY

The mailing address of this limited liability company in the of Florida is:

151 CRANDON BLVD, # 308 KEY BISCAYNE, FLORIDA 33149

ARTICLE STREET ADDRESS OF COMPANY

ORPORATIONS
EE, FLORIDA
LI indited The street address of the principal office liability company in the State of Florida is: of

151 CRANDON BLVD, # 308 KEY BISCAYNE, FLORIDA 33149

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ARTICLE VI ADMISSION OF NEW MEMBERS

The Company may admit new members as provided in the Operating Agreement of the limited liability company.

ARTICLE VII AMENDMENT(S) AND/OR MODIFICATION(S)

These Articles of Organization may be amended, modified and/or changed in the manner provided for in the Operating Agreement of this limited liability company.

ARTICLE VIII REGISTERED AGENT AND REGISTERED AGENT'S ADDRESS

The Registered Agent for the said limited liability company shall be and the registered agent's address shall be located at:

RUBY SANCHEZ 2200 SOUTH DIXIE HIGHWAY, 7TH FLOOR MIAMI, FLORIDA 33133

or such other place as the company shall from time to time designate, with appropriate notice being given to the Secretary of State.

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ARTICLE IX MEMBER-MANAGEMENT AND MEMBER-MANAGEMENT AUTHORITY

The limited liability company is to be managed by it's Members, and is therefore, a Member-Managed Company. The names and street addresses of the Members of the limited liability company, who, subject to the Operating Agreement, and the laws of the State of Florida, shall be:

MEMBER'S NAME

1. ENRIQUE ALVARADO

<u>ADDRESS</u>

151 Crandon Blvd, # 308 Key Biscayne, Florida 33149

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CERTIFICATE AND ACKNOWLEDGEMENT ACCEPTING DESIGNATION AS AGENT UPON WHOM SERVICE OF PROCESS WITHIN THIS STATE MAY BE SERVED

Pursuant to Florida Statutes, Chapter 608, the undersigned agrees to act in the capacity of registered agent and to accept the service of process for the above-stated limited liability company at the place designated in the Articles of Organization. The undersigned further agrees to fully comply with the provisions of all applicable statutes and laws of the State of Florida relating to the proper and complete discharge of its duties.

to the proper and complete discharge of its duties. Registered Agent Print Name: RUBY SANCHEZ STATE OF FLORIDA SS 1 COUNTY OF DADE BEFORE ME, the undersigned authority, duly authorized to administer oaths and take acknowledgments, personally appeared RUBY SANCHEZ who acknowledges to having executed the foregoing instrument () who is personally known to me and/or (XX) who has produced FLORIDA DRIVER'S LICENSE as identification and who did take an oath. as identification Witness my hand and seal in the County and State last aforesaid this _ 25th Hugo Enrique Dorte My Commission CC962647 Expires November 26, 2004 (Sign) (Affix Notary Public's ž

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