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Florida Department of State

Division of Corporations

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To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

Phone : (305) 634-3694

Fax Number : (305) 633-9696

LIMITED LIABILITY COMPANY

ATOB, L.L.C.

Certificate of Status	0
Certified Copy	0
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ARTICLES OF ORGANIZATION
OF
ATOB, L.L.C.

ARTICLE I -- NAME

The name of the limited liability company is ATOB, L.L.C.,
(the "Company").

ARTICLE II -- DURATION

The period of duration for the Company shall be 50 years.

ARTICLE III -- ADDRESS

The mailing address and street address of the principal office of the Company is

C/o Antonio Torrellio
2642 Collins Avenue, #210
Miami Beach, FL 33140

ARTICLE IV -- INITIAL REGISTERED OFFICE AND AGENT

The name of the initial registered agent of the Corporation and the street address of the registered office of the Company is:

C/o Antonio Torrellio
2642 Collins Avenue, #210
Miami Beach, FL 33140

ARTICLE V -- MANAGEMENT

The Company is to be managed by the members:

Antonio Torrellio
2642 Collins Avenue, #210
Miami Beach, FL 33140

Alexis De Beaumont
4580 Post Ave.
Miami Beach, FL 33140

Akanji Okuboye
2982 Alton Road
Miami Beach, FL 33140

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ARTICLE VI -- PURPOSE

This company is organized for the purposes of transacting any and all lawful business authorized to Limited Liability Companies organized in Florida.

ARTICLE VII -- ADMISSION OF ADDITIONAL MEMBERS

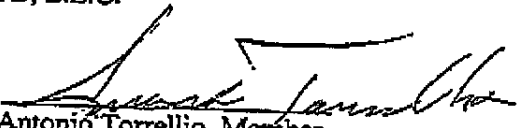
The members of the Company shall have the right to admit additional members by the unanimous consent of, and subject to the terms and conditions of, all the remaining members.

ARTICLE VIII -- MEMBERS RIGHT TO CONTINUE BUSINESS

The members of the Company shall not have the right to continue the business on the death, retirement, resignation, expulsion bankruptcy, or dissolution of a member or the occurrence of any other event that terminates the continued membership of a member in the company, unless the business of the company is continued by the consent of all the remaining members.

IN WITNESS WHEREOF, I have hereunto affixed my hand as a member of this Limited Liability Company on this 27 day of July, 2001.

ATOB, L.L.C.

By: 
Antonio Torrellio, Member

H 01000085244**CERTIFICATION 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, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, 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 ATOB, L.L.C.
2. The name and address of the registered agent and office is:

Antonio Torrellio
2642 Collins Avenue, #210
Miami Beach, FL 33140

Having been named as registered agent and to accept service of process for the above stated limited Liability Company at the place designated on 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.

Date

7/27/01
Antonio Torrellio**H 01000085244**

Atob designate registered agent