



LO1000014046

ACCOUNT NO. : 072100000032

REFERENCE : 433916 7252960

AUTHORIZATION :

*Patricia Piguto*

COST LIMIT : \$ 155.00

ORDER DATE : August 20, 2001

ORDER TIME : 12:05 PM

ORDER NO. : 433916-005

CUSTOMER NO: 7252960

CUSTOMER: Ms. Vivian Williams  
Linda Larrea, P.a.

Suite 111  
2300 Coral Way  
Miami, FL 33145

300004547553--7

RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

2001 AUG 21 PM 2:30

NOT RECORDED  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

DOMESTIC FILING

NAME: CALA DISTRIBUTION, L.C.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 AUG 21 PM 2:56

FILED

EFFECTIVE DATE:

- ARTICLES OF INCORPORATION
- CERTIFICATE OF LIMITED PARTNERSHIP
- ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Deborah Schroder - EXT. 1118

EXAMINER'S INITIALS:

*LO1-14046*  
*BA 8/21*

**ARTICLES OF ORGANIZATION  
OF  
CALA DISTRIBUTION, L.C.**

These Articles of Organization are made for the purpose of organizing a Florida Limited Liability Company under the Florida Limited Liability Company Act (Florida Statutes Chapter 608).

1. Name. The name of this limited liability company is **CALA DISTRIBUTION, L.C.**
2. Duration. The latest date upon which the limited liability company is to dissolve is January 1, 2040.
3. Mailing Address and Street Address. The Company's mailing and street address is: **9555 S.W. 24<sup>th</sup> Street, #G102, Miami, Florida 33165.**
4. Registered Agent and Office. The name of the initial registered agent of the Company is **DADE CORPORATE SERVICES, INC.** The street address of the initial registered agent of the Company is **2300 Coral Way, Suite 103, Miami, Florida 33145.**
5. Additional Members. Additional members to the Company may be admitted, but only if all the current members agree to the admission of the additional members and to the terms of admission.
6. Termination of Membership. If a member of the Company dies, retires, resigns, is expelled, is dissolved, experiences bankruptcy, or upon the occurrence of any other event which terminates the continued membership of a member in the Company, the remaining members may, by unanimous written agreement, continue the business of the Company.
7. Management of the Company. The management of the limited liability company is reserved to the members, through a managing member. The following will be the initial managing member:

Name and Address:

Eduardo Cabrera

9555 SW, 24<sup>th</sup> Street #G102  
Miami, Florida 33165

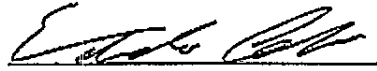
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 AUG 21 PM 2:57

FILED

8. Regulations. The members shall have the power to adopt, alter, amend, or repeal regulations of the Company containing provisions for the regulation and management of the affairs of the Company.
9. Date of Existence of the Company. The existence of the Company shall commence on the date of filing the Articles of Organization by the Florida Department of State.

The undersigned executed these Articles of Organization effective as of the \_\_\_ day of August 17, 2001.



EDUARDO CABRERA

FILED  
01 AUG 21 PM 2:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

PURSUANT TO THE PROVISIONS OF SECTION 608.415, 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:

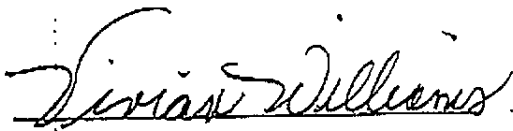
**CALA DISTRIBUTION, L.C.**

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

**Dade Corporate Services, INC.  
2300 Coral Way, Suite 103  
Miami, Florida 33145**

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.

**DADE CORPORATE SERVICES**  
Registered Agent

  
Vivian Williams  
President

(Date) *8/21/01*

FILED  
01 AUG 21 PM 2:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA