

LD2000011914

TRANSMITTAL LETTER FOR LIMITED LIABILITY COMPANY

Registration Section
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399
(850) 487-6051

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-05/09/02--01049--011
***130.00 ***130.00

FILED
2002 MAY -9 PM 2:12
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

SUBJECT:

RESTREPO FAMILY ENTERPRISES, LLC.

(PROPOSED CORPORATE NAME, INCLUDING SUFFIX)

Enclosed please find an original and one (1) copy of the articles of organization and a firm check in the amount of \$130.00 to cover the following:

<input checked="" type="checkbox"/>	\$100.00 Filing Fee for Articles of Organization
<input checked="" type="checkbox"/>	\$ 25.00 Filing Fee for Registered Agent Designation
<input type="checkbox"/>	\$ 25.00 Filing Fee for Certificate of Conversion
<input type="checkbox"/>	\$ 30.00 Certified Copy
<input checked="" type="checkbox"/>	\$ 5.00 Certificate of Status

EFFECTIVE DATE

05/08/02

Dated this 8th day of March, 2001.
May 2002

Colleen Nelson
COLLEEN NELSON

FROM: COLLEEN NELSON
120 North U.S. Highway One, Suite 200
Tequesta, Florida 33469
(561) 747-9608

J. BRYAN MAY 16 2002

ARTICLES OF ORGANIZATION
FOR
RESTREPO FAMILY ENTERPRISES, LLC

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

The undersigned member hereby makes, subscribes, acknowledges, and files these
Articles of Organization for the purposes of forming a Limited Liability Company under
the Laws of the State of Florida.

ARTICLE I - NAME

The name of the Limited Liability Company shall be:

RESTREPO FAMILY ENTERPRISES, LLC

ARTICLE II - ADDRESS

The mailing address of this Limited Liability Company shall be:

EFFECTIVE DATE

05/08/02

1433 White Pine Drive, Wellington, Florida 33414.

ARTICLE III - DURATION

This Corporation shall exist in perpetuity.

ARTICLE IV - EFFECTIVE DATE

The effective date of the above-stated Limited Liability Company, Restrepo Family
Enterprises, LLC, shall be May 8, 2002.

ARTICLE V - DURATION

This Limited Liability Company shall exist in perpetuity.

ARTICLE VI - PURPOSE

The above-stated Limited Liability Company is organized for the purpose of
engaging in any activity or business permitted under

the Laws of the State of Florida or of the United States of America.

ARTICLE VII - MANAGEMENT

The management of this Limited Liability company is reserved to its members in accordance with regulations adopted by the members for the management of the business and affairs of the company.

ARTICLE VIII - INITIAL REGISTERED OFFICE AND AGENT

The name of the initial Registered Agent is COLLEEN NELSON and the street address in this State of the initial registered agent of the Limited Liability Company is 120 North U. S. Highway One, Tequesta, Suite 200, Florida 33469.

ARTICLE IX - INITIAL MEMBERS

The initial membership of the Limited Liability Company shall consist of two (2) members. The number of members may be increased from time to time subject to the regulations of this Limited Liability Company, but shall never be less than one (1). The name and address of the initial members are:

- | | | | |
|----|---------------------------|----|---------------------------|
| 1. | Hernan Antonio Restrepo | 2. | CYNTHIA P. RESTREPO |
| | 1433 White Pine Drive | | 1433 White Pine Drive |
| | Wellington, Florida 33414 | | Wellington, Florida 33414 |

IN WITNESS WHEREOF, I have made and subscribed these Articles of Organization
this 8 day of ~~March~~, 2002.

May


HERNAN ANTONIO RESTREPO


CYNTHIA P. RESTREPO

(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.)

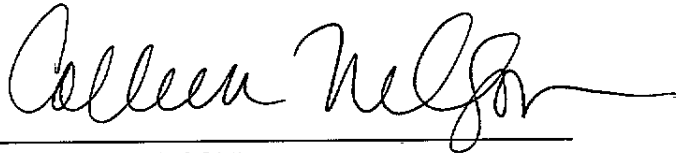
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ACCEPTANCE OF REGISTERED AGENT DESIGNATED
IN ARTICLES OF ORGANIZATION

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company, Restrepo Family Enterprises, LLC, at the place designated in the Articles of Organization, 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 willing to accept the obligations of my position as Registered Aent as provided for in Chapter 608, Florida Statutes.



COLLEEN NELSON

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TALLAHASSEE, FLORIDA