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SECRETARIOS SEE FLORIDA CIVISION CONTRACTOR GOVERNOR DE CONTRACTOR GOVERNOR DE CONTRACTOR DE CONT

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OZ WW -1 PH 1: 11 OFFICE USE ONLY (Document #) EXPRESS CORPORATE FILING SERVICE INC. (Requestor's Name) 1000 PONCE DE LEON BLVD. STE: 101 (Address) CORAL GABLES, FL 33134 305-444-4994 (City, State, Zip) OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): 1. ARAMAC INVESTMENTS, (Corporation Name) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Z Certified Copy Walk in Pick up time Mail out Will wait Photocopy Certificate of Status **AMENDMENTS** NEW FILINGS Profit Amendment NonProfit Resignation of R.A., Officer/Director Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION! OTHER FILNGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement

Trademark

Examiner's Initials

Other

CR2E031(9/92)

Oct 16 02 12:55p

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: ARAMAC INVESTMENTS, LLC ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: [T]
7805 W 44 LANE, HIALEAH, FL 33014-4236 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
ROBERTO CAMARA Name NAME
Florida street address (P.O. Box NOT acceptable) HIALEAH FL 33014 City, State, and Zip

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 - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Correlate & Signature of a member or 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 berein are true.)

ROBERTO CAMARA

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

5-25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)