

SLORETARY OF STATE TALLAHASSEE, FLORIDA

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)205-0383 . _

From:

Account Name : USA CORPORATE SERVICES INC.

Account Number: I20000000220 Phone

: (800)891-7432

Fax Number

: (518)433-1489

LIMITED LIABILITY COMPANY

DISTRIBUTION HORIZONS, LLC

Certificate of Status	0
Certified Copy	1
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ARTICLES OF ORGANIZATION SLEERETARY OF STATE TALLAHASSEE, FLORIDA

DISTRIBUTION HORIZONS, LLC

Pursuant to section 608.407, Florida Statutes

- 1. The name of the Limited Liability company is: DISTRIBUTION HORIZONS, LLC
- 2. The mailing address and street address of the principal office of the Limited Liability Company is:

255 ALHAMBRA CR., SUITE 640, CORAL GABLES, FL 33134

3. The name and address of the registered agent is as follows:

RAFAEL VILLOLDO, 255 ALHAMBRA CR., SUITE 640, CORAL GABLES, FL 33134

- 3. The period of duration for the Limited Liability Company shall be perpetual.
- 4. The Limited Liability Company is to be managed by managers and the name(s) and address(s) of such managers are as follows:

JACAVI HOLDINGS, LTD., 255 ALHAMBRA CR., SUITE 640, CORAL GABLES, FL 33134

In Witness Whereof, in accordance with section 608.408(3), Florida Statutes, the execution of this document constitute an affirmation under the penalties of perjury that the facts stated herein are true this day 1st day of November 2002.

Frank/Orlando

Authorized Representative

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11/01/2002 FRI 15:23 FAX 5184331489 USA CORPORATE SERV	ICES 305-648-7303	<u> </u>
Nov 01 02 03:13p Rafael Villoldo - 11/01/2002 FRI 15:10 FAX 5184331488 USA CORPORATE SEE	SVICES	
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Acceptance of Appointment as Registered Agent IALLAHASSEE, FLORIDA

DISTRIBUTION HORIZONS, LLC

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 am familiar with an accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Dated: November 1, 2002

RAEAEL VILLOLDO Registered Agent