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SECRETARY OF STATE TALLAHASSEE, FLORIDA

## Huerta & Alday, C.P.A.s

A Partnership of Professional Associations Washington Mutual Building 2401 East Atlantic Boolevard, Suite 410 Pompano Beach, FL 33062

> (954) 580-4004 Fax (954) 580-4008

Members
American Institute of
Certified Public Accountants

FLORIDA INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS

January 13, 2003

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

Re: Articles of Organization for Florida LLC for Made in the Shade, LLC

Dear Sir/Madam:

J.O. Huerta, C.P.A., P.A.

G. Luis Alday, C.P.A., P.A.

Enclosed please find check number 2881 in the amount of \$130.00 for the time see of the Articles of Organization, Designation of Registered Agent and Certificate of Status for the above-referenced organization.

Should you have any questions or need further information, please do not see contact me.

Very truly yours,

Huerta & Alday, CPAs

G. Luis Alday, CRA

GLA:bc

**Enclosures** 

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is: Made in the Shade, LLC

#### **ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is: C/O G. Luis Alday

2401 East Atlantic Blvd., Ste 410 Pompano Beach, FL 33062 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

	G. Luis Alday				
-		Name			
	2401 East Atlantic Blvd, Ste 410				
-	Florida street address (P.O. Box NOT acceptable)				
	Pompano Beach	FL 33062			
•	(	City, State, and Zip			
liability company a registered agent an statutes relating to accept the obligatio	the place designated in d agree to act in this cap the proper and complete ins of my position agree Regis n additional article mus (In accordance with section of this document constitut that the facts stated herein G. Luis Alday	to accept service of process for the above this certificate, I hereby accept the apportunity. I further agree to comply with the experimence of my duties, and I am familistered agent as provided for in Chapter at the added if an effective date is requested as a sufficient of the added if an effective date is requested as a sufficient of the secution are true.)	interest of the control of the contr	is næof d and	*****
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Filing Fees:
\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)