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Florida Department of State
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To: Division of Corporations
Fax Number : (850) 205-0363

From:
Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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LIMITED LIABILITY COMPANY

Inversiones 2003, llc

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

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DIVISION OF CORPORATION

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ARTICLES OF ORGANIZATION OF
INVERSIONES 2003, LLC
a. LIMITED LIABILITY COMPANY

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I - Name:

The name of the Limited Liability Company is: INVERSIONES 2003, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
5786 Progress Road, Miami, FL 33143.

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be: Perpetual

ARTICLE IV - Management:

The Limited Liability Company is to be managed by the members and the name(s) and address(es)
of the managing members are:

CESAR RODRIGUEZ, MGRM
5786 Progress Road
Miami, FL 33143

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TALLAHASSEE, FLORIDA

Prepared by:
MARIA T. LOPEZ, Esq.
Maria T. Lopez, P.A.
2700 SW 37 Avenue, FL 2
Miami, FL 33133

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ARTICLE V - Admission of Additional Members:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be by unanimous consent of CESAR RODRIGUEZ.

ARTICLE VI - Members' Rights to Continue Business

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other even which terminates the continued membership of a member in the limited liability company shall be determined by the majority of the members as of the date of specified even (as described herein).

IN WITNESS WHEREOF, we have signed these Articles of Organization and acknowledged them to be our act this 17 Day of January, 2003.



MARIA T. LOPEZ, authorized representative

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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Registered Agent / Registered Office

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

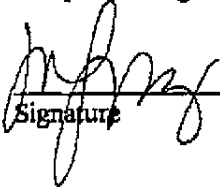
1. The name of the Limited Liability Company is:

INVERSIONES 2003, LLC

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

MARIA T. LOPEZ, P.A.
2700 SW 37 Avenue, 2nd Floor
Miami, FL 33133

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.


Signature

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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