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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)205-0383

From:

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

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DIVISION OF CORPORATIONS

**LIMITED LIABILITY COMPANY****sbd investment, llc**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION

FOR

SBD INVESTMENT, LLC

ARTICLE I. - NAME:

The name of this Limited Liability Company ("Company") shall be:

SBD INVESTMENT, LLC

ARTICLE II. - ADDRESS

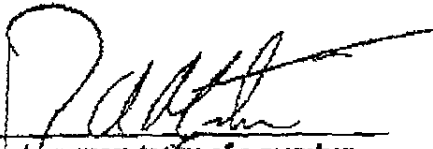
The mailing address and street address of the principal office of the Company is:

c/o 1221 Brickell Avenue, Suite 1509, Miami, Florida 33131.

ARTICLE III. - MANAGEMENT

The Company is to be managed by: a manager or managers and the name(s) and address of such manager(s) is:

Jorge Rosenblut  
1200 Brickell Avenue, Suite 1509  
Miami, Florida 33131



Signature of authorized representative of a member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

STATE OF FLORIDA  
JUL 18 2003

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**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: SBD INVESTMENT, LLC
2. The name and the Florida street address of the registered agent are:

PEDRO A. MARTIN  
NAME

1221 Brickell Avenue, Suite 2100  
Miami, Florida 33131  
Florida street address (P.O. BOX NOT ACCEPTABLE)

*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

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CLERK OF COURT  
PAID 10/10/2003