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(Re	equestor's Name)	
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PICK-UP	TIAW [MAIL
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DINGSEN OF CORPORATIONS
AND ANALYSISE FLORIDA

J. BRYAN AUG 2 2 2007

RICHARD A. GARCIA, C.P.A.

Certified Public Accountant

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5775 Blue Lagoon Drive Suite 230 Miami, Florida 33126 Tel: (305) 267-0280 Fax: (305) 267-4808 Email: expat@overseastax.com

MISHES OF PLANS

August 15, 2003

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

Re: Norkap Investments, LLC Articles of Organization for Florida Limited Liability

To Whom It May Concern:

Enclosed you will find the Articles of Organization for Florida Limited Liability Company for Norkap Investments, LLC. Please process and send back Articles in the FedEx package, which is already included and filled out for your convenience. Also see enclosed check.

Thank you,

Beatriz Gonzalez

Beatring Gonzaly

Enclosures

TRANSMITTAL LETTER

Division of Corporations	
SUBJECT: Norkap Investments, LLC	
	ted Liability Company)
The enclosed Articles of Organization and fe	e(s) are submitted for filing.
Please return all correspondence concerning to	e(s) are submitted for filing. this matter to the following:
Elizabeth N. Garcia	The second secon
(Name of Person)	
Norkap Investments, LLC	
(Firm/Company)	
(This Company)	
5775 Blue Lagoon Dr. Ste. 230	
(Address)	
Miami, FL 33126	
(City/State and Zip Code)	
For further information concerning this matte	r, please call:
Elizabeth N. Garcia	at (305) 269-0473
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
409 E. Gaines Street Tallahassee, Florida 32399	P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: Norkap Investments, LLC

ARTICLE II - Address:

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

	Address:	Mailing Address:
5775 Blue Lagoon	ı Dr.	5775 Blue Lagoon Dr.
Suite 230		Suite 230
Miami, Florida 331	26	Miami, Florida 33126
	Registered Agent, Register Florida street address of th Elizabeth N. Garcia	red Office, & Registered Agent's Signature:
	Nar	
	5775 Blue Lagoon Dr.	. Ste. 230
	Florida street address (P.O. Box NOT acceptable)
	5.5tm.mat	ar 33126
	Miami,	FL TO I

(CONTINUED)

Registered Agent's Signature

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.

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manag "MGRM" = Man		
MGR	Elizabeth N. Garcia	
**	5775 Blue Lagoon Dr. Suite 230	
	Miami, FL 33126	 -
MGRM	Murray Norkin	
	Elizabeth N. Garcia	
	Miami, FL 33126	
		Month of the state
	_	
	<u> </u>	
		- 75
(Use attachment	if necessary)	
NOTE: An add	itional article must be added if an effective date is requested.	
REQUIRED SIG	GNATURE:	
	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 herein are true.)	
	Elizabeth N. Garcia	
	Typed or printed name of signee	
	Filing Fees: S100.00 Filing Fee for Articles of Organization	

- \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)