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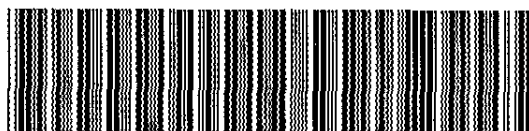
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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PHOENIX ONE LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

WILLIE L JACKSON

(Name of Person)

PHOENIX ONE LLC

(Firm/Company)

18800 NW 2ND AVENUE SUITE 221

(Address)

MIAMI, FLORIDA 33169

(City/State and Zip Code)

For further information concerning this matter, please call:

WILLIE L JACKSON

(Name of Person)

at (305) 655-3555

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

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

MAILING ADDRESS:

Registration Section
Division of Corporations
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:

PHOENIX ONE LLC

ARTICLE II - Address:

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

Principal Office Address:

4962 SW 135 AVENUE
MIRAMAR, FL 33027

Mailing Address:

4962 SW 135 AVENUE
MIRAMAR, FL 33027

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

WILLIE L JACKSON

Name

18800 NW 2ND AVENUE SUITE 221

Florida street address (P.O. Box NOT acceptable)

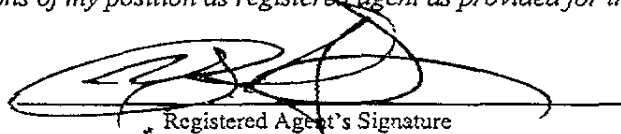
MIAMI FL 33169

City, State, and Zip

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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 as provided for in Chapter 608, F.S..



Registered Agent's Signature

(CONTINUED)

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

JOSEPHINE VELEZ

4962 SW 135 AVENUE

MIRAMAR, FL 33027

MGRM

WILLIE L JACKSON


18800 NW 2ND AVE SUITE 221

MIAMI, FL 33169

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:


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.)

WILLIE L JACKSON

Typed or printed name of signer

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)