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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335 Phone: (305)599-0839 Fax Number: (305)716-0346

LIMITED LIABILITY COMPANY

LEE YUEN, LLC

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | 1 |
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1023

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

· OF

LEE YUEN, LLC

ARTICLE I.

NAME

The name of the Limited Liability Company is:

LEE YUEN, LLC .

ARTICLE II

ADDRESS OF PRINCIPAL OFFICE IN THIS STATE

The initial street and mailing address of the principal office of this Limited Liability Company in the State of Florida is:

3528 M. E. 167th Street, North Miami, Fl 33160

ARTICLE III

NAME OF REGISTERED AGENT, REGISTERED OFFICE.

AND REGISTERED AGENT'S SIGNATURE

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

Li Yan WU 3528 N.E. 167th Street North Miami, Fl 33160 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 508, F.S.

i Yan WU, Registered Agent

10-23-03

Date

ARTICLE IV

MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

In accordance with Section 608.403(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated here are true.

Li Yar WU, Manager Authorize Representative

10-23-03

Date