

LU3000040939

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

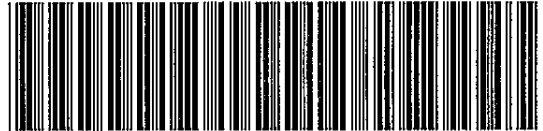
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILING OFFICE
TALLAHASSEE, FLORIDA

Handwritten signature/initials

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03 OCT 24 PM 2:55
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OFFICE USE ONLY(DOCUMENT #)

LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. SANTA MARTA, L.L.C.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- Walk in
 Pick up time 2.00
 Certified Copy
 Mail out
 Will wait
 Photocopy
 Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

ARTICLES OF ORGANIZATION
OF
SANTA MARTA, L.L.C.
A FLORIDA LIMITED LIABILITY COMPANY

FILED
03 OCT 24 PM 2:55
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

SANTA MARTA, L.L.C.

ARTICLE II - Address:

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

**10300 SW 72 ST:
#470C
Miami, Florida 33173**

ARTICLE III - Duration:

The Limited Liability Company shall have perpetual duration.

ARTICLE IV - Members With Interest in LLC:

The names and street addresses of the Members of the Limited Liability Company are as follows:

Name:	Address:
SANTA LUCIA DEVELOPMENT, CORP. A Florida Corporation	10300 SW 72 ST. #470C Miami, Florida 33173
INTEGRAL BUSINESS AND INVESTMENTS, INC. A Florida Corporation	10300 SW 72 ST. #470C Miami, Florida 33173

ARTICLE V - Management:

The Limited Liability Company is to be managed by its members and the name and address of the managing members and their title is as follows:

Name:	Position:	Address:
SANTA LUCIA DEVELOPMENT, CORP., A Florida Corporation	MANAGER	10300 SW 72 ST. #470C Miami, Florida 33173
INTEGRAL BUSINESS AND INVESTMENTS, INC. A Florida Corporation	MANAGER	10300 SW 72 ST. #470C Miami, Florida 33173

ARTICLE VI - Members Rights to Continue Business:

The right 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 event which terminates the continued membership of a member in the limited liability company shall be as set forth in the regulations adopted by the members of the limited liability company.

INTEGRAL BUSINESS AND INVESTMENTS, INC.
A Florida Corporation
Organizing Member

By: 

JUAN L. VALDERRAMA, PRESIDENT

STATE OF FLORIDA)
) SS:
COUNTY OF MIAMI-DADE)

BEFORE ME, the undersigned officer(s), duly authorized to administer oaths and take acknowledgements, personally appeared this day JUAN L. VALDERRAMA as President of INTEGRAL BUSINESS AND INVESTMENTS, INC., Organizing Member who is personally known or produced _____ as identification and who executed the foregoing Articles of Organization and who upon first being duly sworn on oath, depose and states that he executed the same for the purposes therein expressed, on this _____ day of October, 2003.

My Commission Expires:

Notary Public, State of Florida at Large

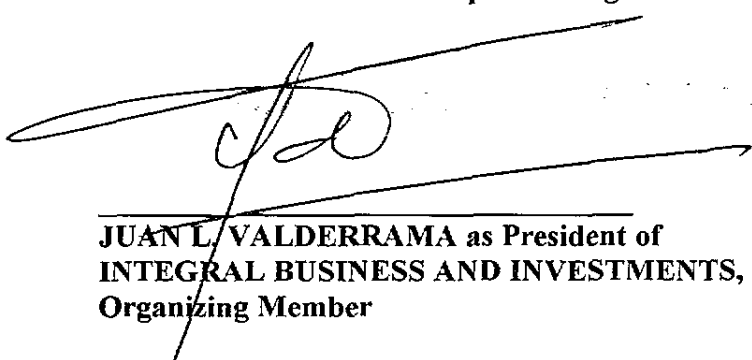
**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

**PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA
STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE
FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.**

- 1. The name of the limited liability company is: SANTA MARTA, L.L.C.**
- 2. The name and address of the registered agent and office is:**

**INTEGRAL BUSINESS AND INVESTMENTS, INC.
10300 SW 72 ST.
#470C
Miami, Florida 33173**

**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 of registered agent and agree to act in its 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.**



**JUAN L. VALDERRAMA as President of
INTEGRAL BUSINESS AND INVESTMENTS, INC.,
Organizing Member**

(Date)