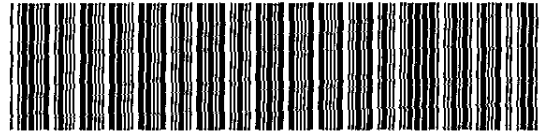


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TALLAHASSEE, FLORIDA



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AL

(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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CHRISTOPHER P. KELLEY, P.A.

TELEPHONE (305) 893-6004
FACSIMILE (305) 893-7666

ATTORNEY AT LAW
11098 BISCAYNE BOULEVARD
SUITE 205
MIAMI, FLORIDA 33161

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OFFICE OF THE CLERK OF THE COURT
TALLAHASSEE, FLORIDA

October 29, 2003

VIA FEDERAL EXPRESS
AIRBILL NO. 8427 0742 6600

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

RE: FTA DISTRIBUTING, LLC
(Proposed Limited Liability Company name)

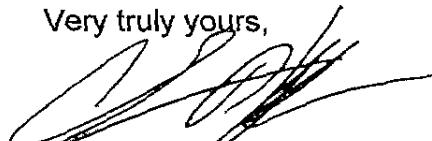
Dear Sir or Madam:

Enclosed is the original and one (1) copy of **Articles of Organization for FTA DISTRIBUTING, LLC**, with my check in the amount of **\$160.00** for articles of organization of Florida Limited Liability Company, including:

\$100.00	Filing fee for Articles of Organization and Affidavit.
\$ 25.00	Designation of Registered Agent
\$ 5.00	Certificate of Status
\$ 30.00	Certified copy of Articles

I understand a letter of acknowledgment will be issued free of charge.

Very truly yours,



CHRISTOPHER P. KELLEY

CPK:rd
Enclosures

**ARTICLES OF ORGANIZATION FOR FLORIDA
LIMITED LIABILITY COMPANY**

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TALLAHASSEE, FLORIDA

**ARTICLE I
NAME**

The name of the Limited Liability Company is:

FTA DISTRIBUTING, LLC

**ARTICLE II
ADDRESS**

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

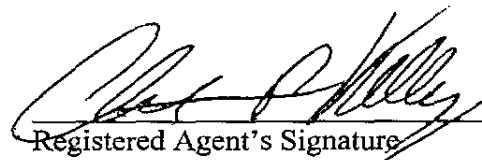
2375 N.E. 195 Street
Miami, Florida 33180

**ARTICLE III
REGISTERED AGENT, REGISTERED OFFICE,
& REGISTERED AGENT'S SIGNATURE**

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

CHRISTOPHER P. KELLEY
11098 Biscayne Boulevard, Suite 205
Miami, Florida 33161

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

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03 OCT 30 PM 2:49
FEDERAL BUREAU OF INVESTIGATION
U.S. DEPARTMENT OF JUSTICE
TALLAHASSEE, FLORIDA

FLORIDA STATE
TALLAHASSEE, FLORIDA

Managing Member	SANDRA CARTLAND	2375 N.E. 195 Street Miami, FL 33180
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(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 are true.)

Typed or printed name of signee