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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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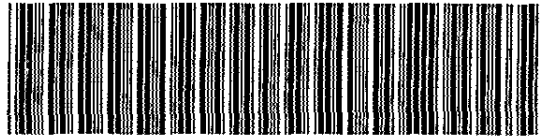
(Business Entity Name)

(Document Number)

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LAW OFFICES

SAMUEL R. DANZIGER
PROFESSIONAL ASSOCIATION
6701 SUNSET DRIVE
SUITE #104
MIAMI, FLORIDA 33143
TELEPHONE: (305) 661-7211
FACSIMILE: (305) 661-7267

January 9th, 2004

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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TALLAHASSEE, FLORIDA

Re: Latin American of Kendall, LLC

Gentlemen:

I enclose Articles of Organization for Latin American of Kendall LLC with a check for \$125.00. Please file same and return the copy to me "file" stamped.

Sincerely,


SAMUEL R. DANIGER

SRD/ade
Encl.

TRANSMITTAL LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: LATIN AMERICAN OF KENDALL, 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:

SAMUEL R. DANZIGER, ESQ.
(Name of Person)

(Firm/Company)

6701 SUNSET DRIVE, SUITE 104
(Address)

MIAMI, FLORIDA 33143
(City/State and Zip Code)

For further information concerning this matter, please call:

SAMUEL R. DANZIGER, ESQ. at (305) 661-7211
(Name of Person) (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:

LATIN AMERICAN OF KENDALL, LLC

ARTICLE II - Address:

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

Principal Office Address:

12060 SW 99th Street

Miami, Florida 33186

Mailing Address:

12060 SW 99th Street

Miami, Florida 33186

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

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

MIGUEL CERVERA

Name

12060 SW 99th Street

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

MIAMI

FLORIDA

City, State, and Zip

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, Florida Statutes..



Registered Agent's Signature

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 TALLAHASSEE, FLORIDA

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:**MGRM -****MIGUEL CERVERA****12060 SW 99th Street****Miami, Florida 33186****MGRM -****RAUL PAREDES****12060 SW 99th Street****Miami, Florida 33186**

(Use attachment if necessary)

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TALLAHASSEE, FLORIDA**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.)

MIGUEL CERVERA

Typed or printed name of signee

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)