

FEB-16-2004 15:21

PAUL SALVER & CO., LLC

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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 205-0383

From:

Account Name : PAUL SALVER, P.A.  
Account Number : I20020000087  
Phone : (954) 389-1333  
Fax Number : (954) 389-1397

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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

Monkey Enterprises, LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

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TALLAHASSEE, FLORIDA

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2-16-04

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Monkey Enterprises, LLC**ARTICLE II - Address:**

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

**Principal Office Address:**8790 S.W. 150 TerraceMiami, FL 33176**Mailing Address:**Same**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Carl Israel  
Name8790 S.W. 150 Terrace  
Florida street address (P.O. Box NOT acceptable)miami FLORIDA 33176  
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..*

X Carl Israel  
Registered Agent's Signature

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TOTAL P.03

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

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

**TYPE****Name and Address**

"MGR" - Manager

"MGRM" - Managing Member

mb-RMCarl Israel8740 S.W. 150 TerraceMiami, FL 33144mb-RAlison Cox3233 S. College CourtWestchase, FL 32837mb-RKathy FrankP.O. Box 75Carmelita, FL 32322

(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 605.408(3), Florida Statute, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Carl Israel

Typed or printed name of signer

**Filing Fees:**

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 10.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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