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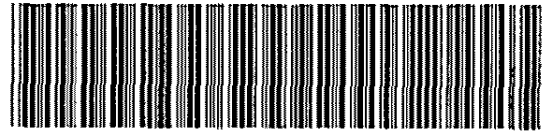
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52404

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Flamers Of The Avenues
(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:

Mansour Kam Dehlavi
(Name of Person)

Flamers Of The Avenues
(Firm/Company)

10531 Running Oak Ct.
(Address)

Jacksonville, FL 32246
(City/State and Zip Code)

For further information concerning this matter, please call:

Mansour Dehlavi at (904) 564-1622
(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

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AND
04 MAY 26 PM 4:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

April 29, 2004

MANSOUR KAM DEHLAVI
FLAMERS OF THE AVENUE
10531 RUNNING OAK CT
JACKSONVILLE, FL 32246

SUBJECT: FLAMERS OF THE AVENUE
Ref. Number: W04000016567

We have received your document for FLAMERS OF THE AVENUE and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6025.

Trevor Brumbley
Document Specialist

Letter Number: 204A00029070

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

Flamers Of The Avenues, L.L.C.

ARTICLE II - Address:

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

Principal Office Address:

10300 Southside Blvd.

Suite 304

Jacksonville, FL 32256

Mailing Address:

10531 Running Oak Ct.

Jacksonville, FL 32246

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

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

Mansour Kam Dehlavi

Name

10531 Running Oak Ct.

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

Jacksonville, FL 32246

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.

Mansour Kam Dehlavi
Registered Agent's Signature

04 MAY 24 PM 4:11
SECRETARY OF STATE
TALLAHASSEE, FL
FILE

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:

MGR

Mansour Kam Dehlavi

10531 Running Oak Ct.

Jacksonville, FL 32246

MGRM

Alireza Mehri Kifar Lahijani

5367 River Forest Drive

Jacksonville, FL 32246

(Use attachment if necessary)

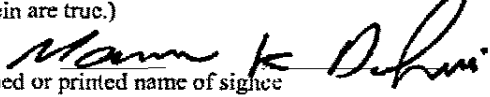
NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:


Signature of a member or an authorized representative of a member.

(In accordance with section 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.)

Mansour K. Dehlavi


Typed or printed name of signer

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)

04 MAY 26 PM 4:03
TALLAHASSEE, FLORIDA
SECRETARY OF STATE