

L04000039486

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

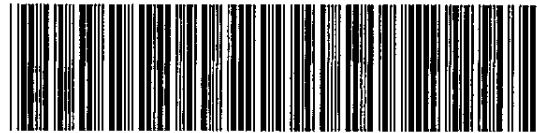
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900035758509

05/25/04--01046--005 **155.00

DIVISION OF REGISTRATION
04 MAY 25 AM 10:46

2004 MAY 25 AM 11:59
CORPORATION'S
TALLAHASSEE, FLORIDA

FILED

BRYAN MAY 25 2004

OFFICE USE ONLY(DOCUMENT #)

LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

FILED
2004 MAY 25 AM 11:59
JAMES H. HARRIS
TALLAHASSEE, FLORIDA

OFFICE USE ONLY

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

1. FALU, 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
FALU, L.C.

FILED
2004 MAY 25 AM 11:59
JENNIFER M. WOODRUFF, REGISTRAR
TALLAHASSEE, FLORIDA

ARTICLE I
Name

The name of the limited liability company ("Company") is FALU, L.C.

ARTICLE II
Address

The mailing address of the Company is 2330 Ponce de Leon Blvd. 33134, Coral Gables, Florida, 33134 and the address of the Company's principal office is 2330 Ponce de Leon Blvd. 33134, Coral Gables, Florida, 33134.

ARTICLE III
Duration

The period of duration for the Company is perpetual, beginning on the date these Articles of Organization are filed by the Florida Department of State.

ARTICLE IV
Registered Agent and Office

The name of Company's initial registered agent in Florida is Alina Longenecker. The address of Company's registered office in Florida is 20 Island Avenue, Apt. 501, Miami, Florida, 33139.

ARTICLE V
Management

The Company is to be managed by one manager or more managers and is, therefore, a manager-managed company. The initial manager will serve until the first annual meeting of the members. The initial manager is identified as follows:

Fabio Visconti, whose address is 1900 Sunset Harbor Drive, Apt.1115, Miami Beach, Florida 33139.

ARTICLE VI
Admission of New Members

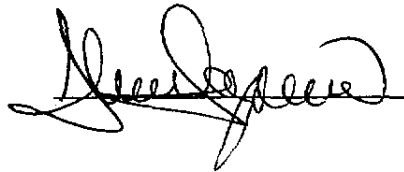
Members of the Company have the right to admit new members, provided that additional members may be admitted only on the unanimous written consent of the existing members, and the existing members shall determine the amount and nature of contributions by new members at the time new members are admitted.

ARTICLE VII
Continuation of Business

The remaining members of the Company have the right 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 Company. The business may be continued only on the unanimous written consent of the remaining members.

In accordance with Section 608.408(3), Florida Statutes, this execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.

IN WITNESS WHEREOF, I have executed these Articles of Organization on this 30th day of April, 2004.

A handwritten signature in black ink, appearing to read "David Green", written over a horizontal line.

FILED
2004 MAY 25 AM 11:59
CORPORATIONS
TALLAHASSEE, FLORIDA

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

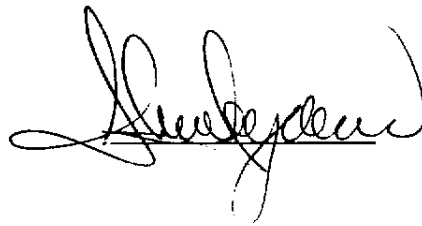
Pursuant to the provisions of Florida Statute Section 608.415 or 608.507, the undersigned Limited Liability Company submits the following statement in designating the registered office/registered agent, in the State of Florida:

1. The name of the limited liability company is FALU, L.C.

2. The name and address of the registered agent and office is: 20 Island Avenue, Apt. 501, Miami Beach, Florida 33139.

Having been named as registered agent and to accept service of process for the above-named 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.

Dated: April 30, 2004

A handwritten signature in black ink, appearing to read "Andrew", written over a horizontal line.

FILED
2004 MAY 25 AM 11:59
JULIA B. BROWN, REGISTRAR
TALLAHASSEE, FLORIDA