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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SCUALIARY OF STAIL

June 15, 2004

Registration Section Division Of Corporation PO BOX 6327 Tallahassee, Florida 32314

Re: LLC

To Whom It May Concern:

Enclosed please find Articles of Organization for Conversion Consultants LLC. Located at 9210 Sunset Drive, Suite 103 Miami, FL 33173. At this time I would also like to request that a Certified Copy of said documents be forwarded to

P.O Box 521155 Miami, FL 33152

If you have any question, please feel free to contact us at 305-271-9250 or 786-261-4921

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SECHETARY OF STATE

### TRANSMITTAL LETTER

SUBJECT:	Conversion Consultants LLC	
	(Name of Limited Liability Company	7)
The enclosed Artic	les of Organization and fee(s) are submitted for filing.	
	Please return all correspondence concerning this r	natter to the following:
_	Zandra Mederos	
	(Name of Person)	
	Mederos and Associates Rea	
	(Firm/Company)	TCAH JUN
	9210 Sunset Drive Suite	103
	(Address)	SEE. B
	Miami, FL 33173	
-	(City/State and Zip Code)	
For further inform	ation concerning this matter, please call:	Ð
	at (	271-9250
(	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

Conversion Consultants LLC	
ARTICLE II - Address:	
The mailing address and street address of	the principal office of the Limited Liability Company
Principal Office Address:	Mailing Address:
9210 Sunset Drive	PO BOX 521155
Suite 103	Miami, FL 33152
Miami, FL 33173	
ARTICLE III - Registered Agent Regis	stered Office, & Registered Agent's Signature:
The name and the Florida street address o	of the registered agent are:
The name and the Florida street address o	of the registered agent are:
The name and the Florida street address o  Jorg  9210 Sunset E	of the registered agent are:  HASSE ARY  Name  Orive Suite 103
The name and the Florida street address o  Jorg  9210 Sunset E	of the registered agent are:  HARY  OF THE PROPERTY OF THE PRO
The name and the Florida street address o  Jorg  9210 Sunset E	of the registered agent are:  HE ARY  Drive Suite 103  ess (P.O. Box NOT acceptable)

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

Page 1 of 2 (CONTINUED)

### The name and address of each Manager or Managing Member is as follows: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM Jorge C. Mederos 9210 Sunset Drive Suite 103 Miami, FL 33173 (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.)

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

#### 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)

Jorge C. Mederos
Typed or printed name of signee