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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 : BERRIZ & GIRALDO P.A.
Account Number : I19990000017
Phone : (305) 485-9300
Fax Number : (305) 485-1098

LIMITED LIABILITY COMPANY

MASED, LLC.

Certificate of Status	1
Certified Copy	0
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TALLAHASSEE, FLORIDA

Handwritten signature/initials

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
OF

MASED, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

MASED, LLC.

ARTICLE II - ADDRESS

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

600 BRICKELL AVE SUITE 503
MIAMI, FL. 33131

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

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

FERNANDO DAMIAN MAZZONI

Name

600 BRICKELL AVE SUITE 503

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

MIAMI, FL 33131

City, State, and Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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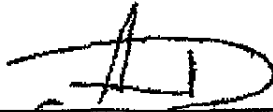
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Yohima del Corral.
4080 SW 84 Ave
Miami, FL. 33155.
(305) 485 9300.

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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, F.S..



REGISTERED AGENT'S SIGNATURE

ARTICLE IV- MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

MERCEDES ISABEL FONT DE BAZTERRICA
600 BRICKELL AVE SUITE 503
MIAMI, FL. 33131

MANAGER

DOLORES BAZTERRICA DE STEVERLYNCK
600 BRICKELL AVE SUITE 503
MIAMI, FL. 33131

MANAGER

(An additional article must be added if an effective date is requested)



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.)

FERNANDO DAMIAN MAZZONI
Typed or printed name of signee

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