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CORPDIRECT AGENTS, INC. (formerly CCRS) 103 N. MERIDIAN STREET, LOWER LEVEL TALLAHASSEE, FL 32301 222-1173 FILING COVER SHEET ACCT. #FCA-14 **CONTACT:** CINDY DATE: 8-30-04 **REF. #:** 001260.29554 CORP. NAME: Rafael Angel Cruz, LLC () ARTICLES OF INCORPORATION () ARTICLES OF DISSOLUTION () ARTICLES OF AMENDMENT () ANNUAL REPORT () TRADEMARK/SERVICE MARK () FICTITIOUS NAME () FOREIGN QUALIFICATION () LIMITED PARTNERSHIP (XX) LIMITED LIABILITY () REINSTATEMENT () MERGER () WITHDRAWAL () CERTIFICATE OF CANCELLATION () OTHER: STATE FEES PREPAID WITH CHECK# 43429 FOR \$ 21,500.00. TO BE APPLIED TO 164 FILINGS. AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED: COST LIMIT: \$___ PLEASE RETURN: () CERTIFIED COPY () CERTIFICATE OF GOOD STANDING (XX) PLAIN STAMPED COPY () CERTIFICATE OF STATUS

Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

RAFAEL ANGEL CRUZ, LLC

ARTICLE II - Address:

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

Principal Of	fice Address:
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Mailing Address:

1721 SW 22ND LANE

1721 SW 22ND LANE

CAPE CORAL, FL 33991

CAPE CORAL, FL 33991

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

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

RAFAEL ANGEL CRUZ

Name

1721 SW 22ND LANE

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

CAPE CORAL, FL 33991

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.

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

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

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

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	The second of th
	RAFAEL ANGEL CRUZ
MGRM	1721 SW 22ND LANE
	CAPE CORAL, FL 33991
(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.)

RAFAEL ANGEL CRUZ

Typed or printed name of signee

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)