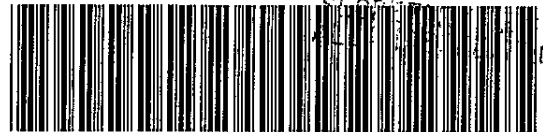


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FILED

2004 SEP 27 P 12:31



STATE
FLORIDA

100041352071

09/27/04--01035--012 **125.00

(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:

AL

Office Use Only

INSERTOS, LLC.
3260 NW 23rd Avenue
Suite 1400E
Pompano Beach, Florida 33069
Tel: (786) 380-7215
Fax: (954) 979-5515

September 21, 2004

FILED

2004 SEP 27 P 12:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: New Application for Limited Liability Company

To Whom It May Concern:

Enclosed herewith please find original Articles of Organization of INSERTOS, LLC ("Insertos") application for authority to conduct business as a Limited Liability Company.

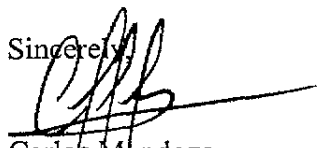
Also enclosed is a check in the amount of \$125.00 which represents filing fees for the Articles of Organization and Designation of Registered Agent for this application.

Kindly date stamp the enclosed copy of this letter and return in the enclosed self-addressed stamped envelope provided for that purpose.

If you have any questions, please do not hesitate to contact me directly.

Thank you for your consideration.

Sincerely,


Carlos Mendoza
Member/Manager

File

TRANSMITTAL LETTER

FILED

TO: Registration Section
Division of Corporations

2004 SEP 27 P 12:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: INSERTOS, LLC
(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:

Carlos Mendoza

(Name of Person)

INSERTOS, LLC

(Firm/Company)

3260 NW 23rd Avenue, Ste 1400E

(Address)

Pompano Beach, Florida 33069

(City/State and Zip Code)

For further information concerning this matter, please call:

Carlos Mendoza

(Name of Person)

at (786) 380-7215

(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**

FILED
2004 SEP 27 P.M.
SECRETARY OF ST.
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

INSERTOS, LLC

ARTICLE II - Address:

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

Principal Office Address:

3260 NW 23rd Avenue, Ste 1400E

Pompano Beach, Florida 33069

Mailing Address:

Same

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

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

Carlos Mendoza

Name

3260 NW 23rd Avenue, Ste 1400E

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

Pompano Beach, FLORIDA 33069

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

FILED

2004 SEP 27 P 12: 31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

MGRM

Carlos Mendoza

3260 NW 23rd Avenue Ste. 1400E

Pompano Beach, Florida 33069

MGR

Manuel De Leca

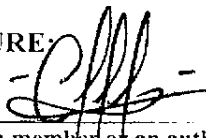
3260 NW 23rd Avenue Ste. 1400E

Pompano Beach Florida 33069

(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.)

Carlos Mendoza

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)