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2004 OCT 13 P 12:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

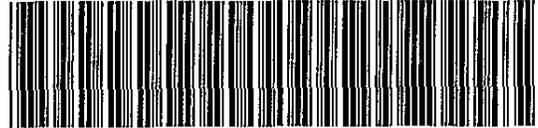
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10/13/04--01040--003 \*\*25.00

10/13/04--01040--002 \*\*100.00

TRANSMITTAL LETTER

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TO: Registration Section  
Division of Corporations

2004 OCT 13 P 12:45

SUBJECT: ARMADILLO INVESTMENTS, LLC  
(Name of Limited Liability Company)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JORGE VELAZQUEZ  
(Name of Person)

ARMADILLO INVESTMENTS, LLC  
(Firm/Company)

9779 S.W. 158th STREET  
(Address)

MIAMI, FL 33157  
(City/State and Zip Code)

For further information concerning this matter, please call:

JORGE VELAZQUEZ at (305) 986-9082  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

ARMADILLO INVESTMENTS, LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

9779 SW 158th Street  
MIAMI, FL 33157

9779 SW 158th Street  
MIAMI, FL 33157

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

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

JORGE VELAZQUEZ

Name

9779 SW 158th Street

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

MIAMI, FL 33157

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, F.S..*

Jorge Velazquez  
Registered Agent's Signature

(CONTINUED)

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

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

**FILED**

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

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MEMBER

RODANTA VELAZQUEZ  
9626 S.W. 9th Street  
MIAMI, FL 33176

SECRETARY OF STATE  
TALLAHASSEE, FLOR

MEMBER

ROBERTO VELAZQUEZ  
9779 S.W. 158th Street  
MIAMI, FL 33157

MANAGING MEMBER

JORGE VELAZQUEZ  
9779 S.W. 158th Street  
MIAMI, FL 33157

\_\_\_\_\_

\_\_\_\_\_

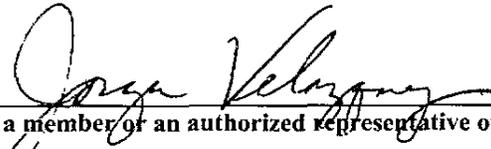
\_\_\_\_\_

\_\_\_\_\_

(Use attachment if necessary)

**NOTE: An additional article must be added if an effective date is requested.**

**REQUIRED SIGNATURE:**



Signature of a member of 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.)

JORGE VELAZQUEZ

Typed or printed name of signee

**Filing Fees:**

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)