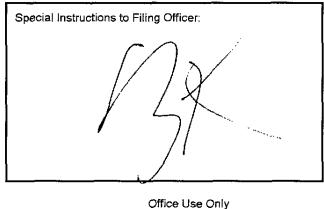
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ARTERIA CONTRACTOR OF TORSES OFFICE USE ONLY(DOCUMENT #) LAZARUS CORPORATE FILING SERVICE 3320 S.W. 87 AVENUE MIAMI, FLORIDA (305)552-5973 OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Document #) Pick up time 2.00 Walk in Certified Copy Mail out | Will wait Photocopy Certificate of Status NEW FILINGS AMENDMENTS Profit Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger REGISTRATION/ OTHER FILINGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark

Other

Examiner's Initials

ARTICLES OF ORGANIZATION OF

EMANUEL PRESCHOOL LLC

ARTICLE I - NAME

The name of this limited liability company is **Emanuel Preschool LLC**(hereinafter "the Company")

ARTICLE II - ADDRESS

The mailing address and principal office is:

2080 S. Ocean Drive Suite 1502 Hallandale, Florida 33009

ARTICLE III: INITIAL REGISTERED OFFICE AND AGENT

The name and mailing address of the initial registered office and the initial registered agent of the Company is:

Lucy Abraham 2080 S. Ocean Drive Suite 1502 Hallandale, Florida 33009

Having been named as registered agent and to accept service of process for the above state 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.

Lucy Abraham- Registered Agent

ARTICLES IV - MANAGEMENT

The Company will be managed by one (1) manager and is, therefore a manager-managed company.

Lucy Abraham 2080 S. Ocean Drive Suite 1502 Hallandale, Florida 33009

In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.

Lucy Abraham, Authorized Representative

ORGANIZER

this 2/ day of 2004	nd subscribed these Articles of Organization				
	Q Quelle !				
	MARCELLE POIRIER				
STATE OF FLORIDA)) SS					
COUNTY OF DADE)					
I HEREBY CERTIFY that on this day, personally appeared before me MARCELLE POIRIER who is well known to me to be the person described in and who executed these Articles of Organization as Organizer, and acknowledged before me that he executed the same freely and voluntarily for the purposes therein expressed.					
SWORN TO AND SUBSCRIBE	before me this $2/37$ of				
<u>Oct.</u> 2004.	Caref M Doc NOTARY PUBLIC State of Florida at large				
My commission expires :					

TAPHL M MCDEE

The Committee 104/00

The DD 062922

The Personally known (10ther LD.