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OIVISION OF CORPORATIO

Division of Corporations

Fax Number : (850)205-0383

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 : (305)634-3694 Fax Number : (305)633-9696

LIMITED LIABILITY COMPANY

3 wings, l.l.c.

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY 3 WINGS, L.L.C.

2004 DEC - 70 A 11: 12

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Article I

The name of the Limited Liability Company is:

3 WINGS, L.L.C.

Article II

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

Mailing Address:

12121 N.E. 16th Avenue

North Miami, Florida 33161

Street Address:

12121 N.E. 16th Avenue

North Miami, Florida 33161

Article III

The period of duration for the Limited Liability Company shall be:

For Thirty (30) years from the date of initial filing. The Limited Liability Company shall dissolve no later than December, 2033

Article IV

The Limited Liability Company is to be managed by a Manager and a Manager, the name(s) and address(es) of the Manager is/are:

Manager and Manager		Address
Anthony D. Caserta	(Manager)	12121 N.E. 16 th Avenuc North Miami, Florida 33161
David Goodstein	(Manager)	394 Route 17-B Monticella New York 12701

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Article V

2064 DEC - 16 A 11: 12

The Limited Liability Company is organized by the following initial member(s), whose name and address OF STATE is/are as follows:

ALLAHASSEE, FLORIDA

Member

Address

C & G Family Ventures, L.L.C.

12121 N.E. 16th Avenue North Miami, Florida 33161

Article VI

Additional members may be admitted by the unanimous written consent of all members under the terms and conditions agreed to by all of the members.

Article VII

The undersigned member or authorized representative of a member of 3 WINGS, L.L.C. certifies:

- the above named limited liability company has at least one member;
- 2. Each member shall make additional capital contributions to the company only on the unanimous consent of all the members.
- 3. No additional members shall be admitted to the company except by the unanimous written consent of all the members of the company and on such terms and conditions as shall be determined by all the members. A member may transfer his or her interest in the company as set forth in the operating agreement of the company.
- 4. The company shall be dissolved on the death, bankruptcy, or dissolution of a member or Chief Executive Chief Executive Manager, or on the occurrence of any other event that terminates the continued membership of a member in the company, as set forth in the operating.

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

Anthony D. Caserta, Manager

STATE OF FLORIDA

Ss:

COUNTY OF DADE

BEFORE ME, the undersigned authority, this ______ day of DECEMBER, 2004, personally appeared, _Anthony D. Caserta ____, to me well known to be the persons who executed the above and foregoing Articles of Organization of 3 WINGS, L.L.C..., and who state that he executed the same for the purposes therein expressed.

MO"A JATOT

SWORN TO AND SUBSCRIBED before me this _ 3_ day of DECEMBER, 2004. My Commission Expires: Joseph A. Spiriti, Jr. Commission # DD132367 IOSEPH SPIRITI 2004 DEC - 10 A 11: 12 rpires: |ULY 08, 2006 lotany Public Bonded Thru Arlantic Sonding Co., lac. SECRETARY OF STATE CERTIFICATE OF DESIGNATION OF REGISTERED SEE, FLORIDA AGENT/REGISTERED OFFICE PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATED A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA. 1. The name of the limited liability company: 3 WINGS, L.L.C. 2. The name and Florida street address of the registered agent are: Anthony D. Caserta 12121 N.E. 16th Avenue North Miami, Florida 33161 Having been named 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 provision 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.

STATE OF FLORIDA

Ss:

COUNTY OF DADE

BEFORE ME, the undersigned authority, this _____3_ day of DECEMBER, 2004, personally appeared, Anthony D. Caserta to me well known to be the persons who executed the above and foregoing Articles of Organization of 3 WINGS, L.L.C., and who state that they executed the same for the purposes therein expressed.

SWORN TO AND SUBSCRIBED before me this _3____ day of DECEMBER,2004. My Commission Expires:

> Commission # DD132367 Expires: JULY 08, 2006 Bonded Thru Allegue Bonding Co., Inc.

JOSEPH SPIRITI Notary Public 75:40 100Z-