

Division of Corporations

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Florida Department of State
Division of Corporations
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DIVISION OF CORPORATIONS

LIMITED LIABILITY COMPANY

KANTIN ACQUISITION, LLC

Certificate of Status	1
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Page Count	02
Estimated Charge	\$160.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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1523402-0002

Fax Audit No. H05000023790

**ARTICLES OF ORGANIZATION
OF
KANTIN ACQUISITION, LLC**

Pursuant to section 608.407, Florida Statutes, the undersigned hereby files these Articles of Organization as follows:

ARTICLE I - NAME

The name of the Limited Liability Company is KANTIN ACQUISITION, LLC.

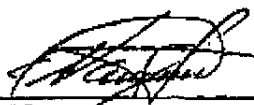
ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is 1906 Timberland Road, Weston, FL 33327.

ARTICLE III - DURATION

The period of duration for the Limited Liability Company is perpetual.

IN WITNESS WHEREOF, the undersigned authorized representative has hereunto set her hand and seal this 20th day of January, 2005.



Eduardo Namuniri
Authorized Representative

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**CERTIFICATE DESIGNATING REGISTERED AGENT
AND REGISTERED OFFICE**

Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned submits the following statement in designating the registered office/registered agent:

Kantin Acquisition, LLC, desiring to organize as a limited liability company under the laws of the State of Florida, has designated CT Corporation System, 1200 South Pine Island Road, Plantation, FL 33324, as its initial Registered Office and has named CT Corporation System, located at said address as its initial Registered Agent.

By: Eduardo Nandrum

Authorized Representative

Having been named Registered Agent for the above stated limited liability company, at the designated Registered Office, the undersigned hereby accepts said appointment and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of the undersigned's duties, and the undersigned is familiar with and accepts the obligations of the undersigned's position as registered agent.

CT CORPORATION SYSTEM

By: 

Name:

Title:

BARBARA A. BURKE
SPECIAL ASSISTANT SECRETARYSECRETARY OF STATE
TALLAHASSEE, FLORIDA

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