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(Re	questor's Name)	
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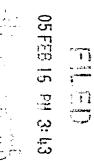
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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: FIRST MISSION L.L.C. (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:
JACQUELINE HAMADY (Name of Person)
JACQUELINE HAMADY
(Firm/Company)
10582 N.W. 51 STREET
DORAL, FLORIDA 33178 (City/State and Zip Code)
For further information concerning this matter, please call:
TACQUELINE HAMADY at 305, 820 10 50 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee Status Status Status Status Status Certified Copy (additional copy is enclosed) S160.00 Filing Fee Certified Copy (additional copy is enclosed)
STREET ADDRESS: Registration Section Registration Section Division of Companions

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
FIRST MISSION 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: 10582 N.W. 51 ST. DURAL, FLORIDA 33178 DURAL, FLORIDA 33178		
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:		
The name and the Florida street address of the registered agent are: TACQUELINE HAMADY Name 10582 N.W. 5 STREET Florida street address (P.O. Box NOT acceptable) DORAL FL 33178 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		
Registered Agen 's Signature (CONTINUED) Page 1 of 2		

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

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

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGR	TACQUELINE HAMADY 10582 NW. 51 STREET DORAL, FL 33178
MGRM	GHASSAN HAMADY 10582 NW. 51 ST REET DORAL, FL 33178
	
(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.)

JACQUELINE HAMADY
Typed or printed name of signee

Filing Feer:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)