

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : ARAZOZA, COMAS, DE TORRES & FERNANDEZ-FRAGA, P.A.
Account Number : 078624003440
Phone : (305) 444-6226
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LIMITED LIABILITY COMPANY

HIALEAH ITALIAN TILE, LLC.

Certificate of Status	1
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DIVISION OF CORPORATIONS

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TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION

OF

HIALEAH ITALIAN TILE, LLC.

The undersigned members to these Articles of Organization hereby associate themselves together to form a Limited Liability Company under the laws of the State of Florida.

ARTICLE I
NAME

The name of this Limited Liability Company is: HIALEAH ITALIAN TILE, LLC.

ARTICLE II
GENERAL NATURE OF BUSINESS

The Limited Liability Company may engage in any activity or business permitted under the laws of the United States and of the State of Florida.

ARTICLE III
TERM OF EXISTENCE

This Limited Liability Company is to exist perpetually. The Limited Liability Company's business will continue without regard to the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company.

ARTICLE IV
ADDRESS

The principal office and mailing address of this Limited Liability Company in the State of Florida is 209 W 21 STREET, HIALEAH, FL 33010. The Board of Managers may from time to time move the principal office to another address in Florida.

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ARTICLE V
REGISTERED OFFICE, REGISTERED AGENT

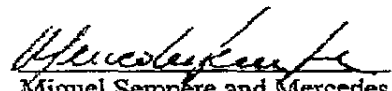
That HIALEAH ITALIAN TILE, LLC., desiring to organize under the laws of the State of Florida, with its principal office as indicated in the Articles of Organization at the County of Miami-Dade, State of Florida, hereby designates JAIME SEMPERE, as its Registered Agent to accept services within the State. The registered office of the Limited Liability Company shall be 209 W 21 STREET, HIALEAH, FL 33010.

ARTICLE VI
MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager - managed company. The Initial Manager of the Company shall be JAIME SEMPERE of 209 W 21 STREET, HIALEAH, FL 33010.

WITNESS the hand and seal of the member in Miami-Dade County, State of Florida, this 25th day of February, 2005

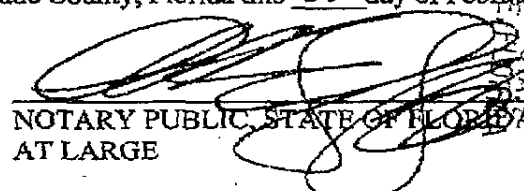
The Member,


Miguel Sempere and Mercedes
Sempere, as Tenants by the
Entireties

STATE OF FLORIDA)
) SS:
COUNTY OF MIAMI-DADE)

PERSONALLY appeared before me, MIGUEL SEMPERE, who produced _____ as identification, or is personally known to me, who being by me first duly sworn, acknowledged that he signed the same for the purposes therein expressed.

WITNESS my hand and seal at Miami-Dade County, Florida this 25th day of February, 2005


NOTARY PUBLIC, STATE OF FLORIDA
AT LARGE

My commission expires:



Adela Fernandez-Fraga
Commission #DD280335
Expires: Feb 26, 2008
Bonded Thru
Atlas Bonding Co., Inc.

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TALLAHASSEE, FLORIDA

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**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF
PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE
SERVED.**

In compliance with Section 48.091, Florida statutes, the following is submitted:

FIRST: That HIALEAH ITALIAN TILE, LLC., desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at the County of Miami-Dade, State of Florida, designates JAIME SEMPERE, as its Registered Agent to accept services within the State. The registered office of the Limited Liability Company shall be 209 W 21 STREET, HIALEAH, FL 33010.

Having been named to accept service of process for the above stated Limited Liability Company, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

The Registered Agent,


JAIME SEMPERE
February 22, 2005

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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