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Division of Corporations

Fax Number : (850)205-0383

No From:

Account Name : EMPIRE CORPORATE KIT COMPANY

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

LIMITED LIABILITY COMPAN

cedar pines academy, llc

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

JUN-20-2005

P.01/03

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I Name

The name of the Limited Liability Company is:

CEDAR PINES ACADEMY, LLC

ARTICLE II

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

2968 Aventura Blvd. Aventura, FL 33180

ARTICLE III Registered Agent, Registered Office & Registered Agent's Signature

The name and the Florida street address of the registered agent are:

Ira R. Shapiro, P.A. 16375 NE 18th Avenue, #225 North Miami Beach, FI. 33162

Having been named as Registered Agent and to accept service of process for the above stated Limited Limbility 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 celating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Ira R. Shabiro, Registered Agent

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Alex Blavatnik, Manager

ARTICLE IV Management

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company. The names of the managers are as follows:

RICHARD CUENCA ALEX BLAVATNIK 3064 NE 210th Street 19955 NE 38th Court, #1606 Aventura, FL 33180 Aventura, FI, Richard Cuenca, Manager

Date: JUNE 5 2005 Date:

(In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes on offirmation under the penalties of perjusy that the foots stated herein are true.)

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