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Florida Department of State

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

: (305)634-3694

Fax Number

: (305)633-9696

LIMITED LIABILITY COMPANY

t & m 1606, l.l.c.

Certificate of Status	0
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Page Count	03
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF

T & M 1606, L.L.C.

ARTICLE I

The name of the Limited Liability Company shall: T & M 1606, L.L.C.

ARTICLE II

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the Act.

ARTICLE III

The mailing address and street address of the principal office of the same of Liability Company is: 9737 N.W. 41" STREET, # 615, MIAMI, FL 33178-2024

ARTICLE IV

The name of the Managing Member(s) for this company shall be: Managing Members

ANTONIO CEPALO

10556 N.W. 26th STREET

SUITE D-101

DORAL, FL 33172

MARINO POLITO

10556 N.W. 26th STREET

SUITE D-101

DORAL, FL 33172

ARTICLE V

The name and the Florida street address of the registered agent: CABANAS & ASSOCIATES, P.A., 10520 N.W. 26th STREET, SUITE C-201, MIAMI, FL 33172

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE/MEMBER/REPRESENTATIVE

T & M 1606, L.L.C.

(Name of Company)

Having been name as Registered Agent and to accept service of process for the above stated Limited Liability Company at the place designated in the Articles of Organization, 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.

CABANAS/A ASSOCIATES, P.A.

Registered Agent

Signature of a Member of 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.)

JOSEPH F. CABANAS

Typed or Printed Name of Signee

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