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(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City)	/State/Zip/Phon/	e#)
PICK-UP	MAIT	MAIL.
(Business Entity Name)		
(Doc	ument Number))
Certified Copies	Certificate	s of Status
Special Instructions to Filing Officer:		

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D6/24/05--01047--003 **160.00

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations				
SUBJECT: 2 CANES, LLC				
SUBJECT: 2 CANES, LLC (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:				
HARRY ZUKER (Name of Person)				
2 CANES, LLC, YO COMNET REALTY, INC, (Firm/Company)				
1900 NW CORPORATE BLVD. #102W				
(Address)				
BOCA RATON, FL 33431 (City/State and Zip Code)				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
For further information concerning this matter, please call: PI+ Y L L S L A M P & L (Name of Person) (Area Code & Daytime Telephone Number)				
Enclosed is a check for the following amount:				
□ \$125.00 Filing Fee Certificate of Status □ \$130.00 Filing Fee Certified Copy (additional copy is enclosed) □ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				

STREET ADDRESS:

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

MAILING ADDRESS:

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:			
2 CANES, 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:			
1900 NW CORPORATE BLVD. SAME # 102 W BOCA RATON, FL 33431 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:			
The name and the Florida street address of the registered agent are:			
HARRY ZUKER Name 1900 NW CORPORATE BLVD #102W Florida street address (P.O. Box NOT acceptable) BOCH RATON FL 33431 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 Agent's Signature

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member (s).

	The name and address of each Manager (or Managing Member is as follows:
	<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
	MGRM	HARRY ZUKER 1900 NW CORPORATE BLVD #102W BOCA RATON, FL 33431
	MGR	KEITH D. CHAMBERS 1900 NW CORPORATE BLVD #102N BOCA RATON, FL 33451
	,	
K	(Use attachment if necessary)	
	NOTE: An additional article must be	added if an effective date is requested.
	REQUIRED SIGNATURE:	7

Signature of a member or an authorized representative of a member.

(In accordance with section 648.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

ARRY ZUKER, MGRM
Typed or printed name of signee

Filing Fees:

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

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

ARTICLE V – Effective Date Requested

June 23, 2005, is the date requested for organization

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