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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305)634-3694
Fax Number : (305)633-9696

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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

ironman enterprises llc

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

J. BRYAN JUL 15 2005

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

IRONMAN ENTERPRISES LLC

ARTICLE II - Address:

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

Principal Office Address:

9559 Collins Ave.
Suite 401
Surfside, Florida 33154

Mailing Address:

9559 Collins Ave.
Suite 401
Surfside, Florida 33154

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

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

CARLOS CATTANEO

Name

9559 Collins Ave. Suite 401

Florida street address (P.O. Box NOT acceptable)

Miami FL 33154

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
Carlos Cattaneo

(CONTINUED)

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

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


Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:MANAGERSTAR OF THE SEA INVESTMENTS LLC9559 Collins Ave, Suite 401
Miami, Florida 33154MGRMJORGE OMAR GIOVANNELLI9559 Collins Ave, Suite 401
Miami, Florida 33154MGRMSILVIA ALEJANDRA GHERSI9559 Collins Ave Suite 401
Miami, Florida 33154

(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 Statute, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Carlos CattaneoTyped or printed name of signer**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)

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