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DIVISION OF CORPORATIONS

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

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

LIMITED LIABILITY COMPANY
TWIN BROTHERS INVESTMENTS, LLC

Certificate of Status	0
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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED
LIABILITY COMPANY
OF
TWIN BROTHERS INVESTMENTS, LLC**

ARTICLE I - NAME

THE NAME OF THE LIMITED LIABILITY COMPANY IS:

TWIN BROTHERS INVESTMENTS, LLC

ARTICLE II - ADDRESS

THE MAILING ADDRESS AND STREET ADDRESS OF THE PRINCIPAL OFFICE OF THE LIMITED LIABILITY COMPANY IS:

7961 NW 113 Place
Miami, FL 33178

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

ARTICLE III - DURATION

THE PERIOD OF DURATION FOR THE LIMITED LIABILITY COMPANY SHALL BE:

This company shall exist perpetually.

ARTICLE IV - MANAGEMENT

THE LIMITED LIABILITY COMPANY IS TO BE MANAGED BY THE MEMBERS AND THE NAME AND ADDRESS OF THE MANAGING MEMBERS ARE:

Rodolfo Llanes
7961 NW 113 Place
Miami, FL 33178

Diana P. Llanes
7961 NW 113 Place
Miami, FL 33178

ARTICLE V - ADMISSION OF ADDITIONAL MEMBERS

THE RIGHT, IF GIVEN, OF THE REMAINING MEMBERS TO ADMIT ADDITIONAL MEMBERS AND THE TERMS AND CONDITIONS OF THE ADMISSIONS SHALL BE

To the discretion and approval by all members.

ARTICLE VI - MEMBERS RIGHTS TO CONTINUE BUSINESS

UPON 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, THE REMAINING MEMBERS, BY UNANIMOUS APPROVAL, MAY ELECT TO CONTINUE THE BUSINESS OF THE LIMITED LIABILITY COMPANY.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.50, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATION THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: Twin Brothers Investments, LLC
2. The name and address of the registered agent and office is:

Rodolfo Llanes
7961 NW 113 Place
Miami, FL 33178

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.



Rodolfo Llanes, Registered Agent-Manager Member

ALLAHACOLE, FLORIDA

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