LU50000 91718

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



300058281883

09/19/05--01009--006 **155.00

DIVISION CLASSINGNION

SECULT STATE OF SEATER AND SECULT STATE

merging per late per lat

EXPRESS CORPORATE FILING SERVICE INC. Requestor's Name 1000 PONCE DE LEON BLVD. SUITE:101 Address (305) 444-4994 CORAL GABLES, FL 33134 Phone # City/State/Zip OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Pick up time Certified Copy Photocopy Mail out Will wait Certificate of Status NEW FILINGS AMENDMENTS 3 Profit Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger REGISTRATION/ OTHER FILIGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement

Trademark

Examiner's Initials

Other

CR2E031(9/92)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Inbuilt Developmen	t Group 11 C
(Must end with the words "Limited Liability Company, "Limite	
ARTICLE II - Address:	
The mailing address and street address of the pr	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Tincipal Office Address.	Mannie Address.
4941 S.W. 74th. Court	SAME
Miami, Florida 33155-4412	
<u> </u>	
A DOMESTIC TO THE ACT OF THE ACT	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regis	Hered Agent, You must designate an individual or another
business entity with an active Florida registration.)	
The name and the Florida street address of the	registered agent are:
The hand and the Florida street address of the	ognicied agoin are.
Patrick J. F	
Name	***
4941 S.W. 74	th. Court
Florida street ad	dress (P.O. Box NOT acceptable)
Miami.	FL 33155-4412
City, State,	
	accept service of process for the above stated limited this certificate, I hereby accept the appointment as
	ints certificate, I hereby accept the appointment as ly. I further agree to comply with the provisions of all
	erformance of my duties, and I am familiar with and
	istered agent as provided for in Chapter 608, F.S

(CONTINUED) Page 1 of 2

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Membe	Name and Address:
MGRM	Patrick J. Rebull 4941 SW 74th. Court Miami, Florida 33155-4412
MGRM	Rafael R. Cabrera 4941 SW 74th. Court Miami, Florida 33155-4412
	than the date of filing:
<u>REQUIRED</u> SIGNATURE:	
Signature of a	a member or an authorized representative of a member.
of this docum	e with section 608.408(3), Florida Statutes, the execution ent constitutes an affirmation under the penalties of perjury

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)

Patrick J. Rebull Typed or printed name of signee