

L05000098870

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

LIMITED LIABILITY COMPANY

gamma granite, llc

AL

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

October 5, 2005

EMPIRE

SUBJECT: GAMMA GRANITE, LLC
REF: W05000045899

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Agnes Lunt
Document Specialist

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

GAMMA GRANITE, LLC

ARTICLE II - Address:

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

Principal Office Address:

8159 NW 66 St
MIAMI, FL 33166

Mailing Address:

8159 NW 66 St
MIAMI, FL 33166

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

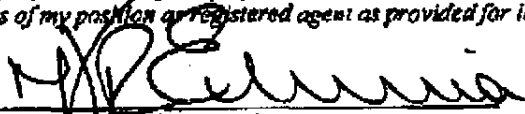
The name and the Florida street address of the registered agent are:

RODRIGUEZ-ESCHERRERIA'S ASSOCIATES, P.A.
Name

2100 PONCE DE LEON BLVD, SUITE 600
Florida street address (P.O. Box NOT acceptable)

CORAL GABLES, FL 33134
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)

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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:

MGRM

DANIEL CANOON
201 CRANDON BLVD #200
1651 DISCONE, FL. 33149

MEMBER

VERMILLION, CORP.
2100 PONCE DE LEON BLVD STE 600
CORAL GABLES, FL. 33134

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

[Signature]
Signature of a member or 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.)

M. VICTORIA RODRIGUEZ-ETHEMERIA
Typed 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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