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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

RECEIVED
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DIVISION OF CORPORATIONS

LIMITED LIABILITY COMPANY

danila llc

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

J. BRYAN OCT 11 2005

10/10/2005 3:11 PM

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**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is:

DANILA LLC.

Article II - Address:

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

Principal Office Address:

12738 MAYPAN DR.

BOCA RATON

FL 33428

Mailing Address:

12738 MAYPAN DR

BOCA RATON

FL 33428

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

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

MARCELO OLSAK

Name

12738 MAYPAN DR.

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

BOCA RATON, FL 33428

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

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ARTICLE IV - Management / Member(s):

The name(s) and address(es) of each Manager or Managing Member is as follows"

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

MARCELO HECTOR OLSAK

12738 MAY PAN DR.

BOCA RATON, FL 33428

MGR

DANILA DEANGELIS OLIVAR

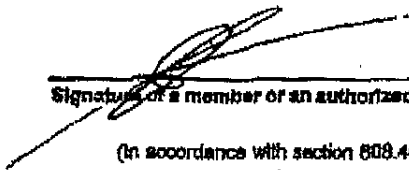
SAN MARINO 1369

CARRASCO - MONTEVIDEO - URUGUAY

(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 809.408(3), Florida Statutes,
the execution of this document constitutes an affirmation under
the penalties of perjury that the facts stated herein are true.)

MARCELO OLSAK

Typed or printed name of signer

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