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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : COMPUTAX USA INC. Account Number : I2000000254

Phone Fax Number : (727)546-3335 : (727)546-3365

M. Thomas NOV - 2 2006

LIMITED LIABILITY COMPANY

A. B. T. ENTERPRISES, L.L.C.

Certificate of Status	0
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

A. B. T. ENTERPRISES, L.L.C.

ARTICLE II - Address:

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

> 11410 8th Way N #307 St Petersburg FL 33716

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

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

Bartosz Tokarczyk 11410 8th Way N #307 St Petersburg FL 33716

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.

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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: Name and Address:

Manager Bartosz Tokarczyk

11410 8th Way N #307 St Petersburg FL 33716

Manager Agnieszka Tokarczyk

11410 8th Way N #307 St Petersburg FL 33716

REQUIRED 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.)

Bartosz Tokarczyk

Typed or printed name of signee