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Division of Corporations

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## 11/3/2005

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**OF**

**CAF DISTRIBUTION, LLC.**

**ARTICLE I - NAME**

The name of the Limited Liability Company is:

**CAF DISTRIBUTION, LLC.**

**ARTICLE II - ADDRESS**

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

**10341 MANGO CT  
PEMBROKE PINES, FL. 33026**

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:**

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

**LUIS HERNANDO CARDONA**

**10341 MANGO CT**

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

**PEMBROKE PINES, FL. 33026**  
City, State, and Zip

**BERRIZ & GIRALDO P.A.  
4080 SW 84 AVE SUITE C  
MIAMI, FL 33155  
(305) 485-9300**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILED**

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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..

*[Signature]*  
REGISTERED AGENT'S SIGNATURE

ARTICLE IV- MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

**LUIS HERNANDO CARDONA**  
10341 MANGO CT  
PEMBROKE PINES, FL. 33026

**MANAGER**

**ADRIANA FARFAN**  
10341 MANGO CT  
PEMBROKE PINES, FL. 33026

**MANAGER**

(An additional article must be added if an effective date is requested)

*[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.)

**LUIS HERNANDO CARDONA**  
Typed or printed name of signee

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SECRETARY OF STATE  
TELEPHONE 392-2111

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