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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

: (305)634-3694

Fax Number

: (305)633~9696

LIMITED LIABILITY COMPANY

atlas consultants, llc

Certificate of Status	0
Certified Copy	1
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ARTICLES OF ORGANIZATION OF ATLAS CONSULTANTS, LLC

ARTICLE I - NAME

The name of the limited liability company is Atlas Consultants, LLC, ("company").

ARTICLE II - ADDRESS

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

Principal Office Address:

Mailing Address:

80 SW 8th Street, Suite 2000 Miami, Florida 33130

P.O. Box 653722 Miami, Florida 33265

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

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

D. Ross Bridger, Esq. 80 SW 8th Street, Suite 2000 Miami, Florida 33130

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..

ARTICLE IV - MANAGERS OR MANAGING MEMBERS

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

Title:

"MGR" = Manager

"MGMR" = Managing Member

MGR

Frank A. Artiles P.O. Box 653722 Miami, Florida 33265

Name and Address:

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida States The execution of this document constitutes an affirmation under the conpensities of perjury that the facts stated herein are true.

D. Ross Bridger, as authorized agent for Frank A.

Typed or printed name of signee

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