

LOS000120369

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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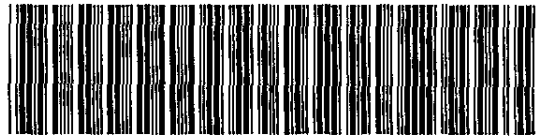
(Business Entity Name)

(Document Number)

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OK

LAW OFFICES
ALFRED ARONOVITZ

POST OFFICE BOX 164550
MIAMI, FLORIDA 33116-4550

(305) 412-4120
FAX (305) 412-4121

ALFRED ARONOVITZ

DEREK C. ARONOVITZ
(1962-1994)

December 9, 2005

Office of Secretary of State
State of Florida
2661 Executive Center Circle
Clifton Building
Tallahassee, Florida 32301

Re: JALI, LLC

Gentlemen:

Enclosed for filing are the original and one duplicate of the Articles of Organization for JALI, LLC. Also enclosed is my check No. 11660 dated December 9, 2005, in the amount of \$155.00 to cover the cost of filing (\$135.00) and a certified copy (\$20.00).

If you have any questions, please call me at the number shown on this letterhead. Thank you for your courtesy and prompt attention to this matter.

Very truly yours,


ALFRED ARONOVITZ

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Enclosures

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TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION OF

JALI, LLC

The undersigned, desiring to form a limited liability company for the purposes set forth herein and in conformance with the Florida Limited Liability Company Act, does hereby establish the following:

1. **Name.** The name of the limited liability company is:

JALI, LLC

2. **Duration.** The period of duration of the limited liability company is perpetual unless sooner dissolved as provided by statute.

3. **Purpose.** This limited liability company is organized for the purpose of engaging in any lawful business in which a limited liability company may engage under Florida law.

4. **Principal Place of Business and Mailing Address.** The address of its principal place of business, as well as the mailing address for this limited liability company is:

7600 Red Road
Suite 124
South Miami, FL 33143

5. **Registered Agent and Office.** The name and address of its initial registered agent in the State of Florida, whose Consent to appoint as Registered Agent accompanies these Articles, is:

Alfred Aronovitz
11151 S.W. 93rd Avenue
Miami, FL 33176

6. **Initial Members.** The names of the initial members of the limited liability company and their addresses are as follows:

Steve Halegua
Marla Helgua

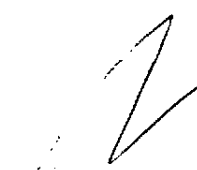
Address of all members:
5520 Oakwood Lane
Coral Gables, FL 33156

7. **Admission of Additional Members.** Additional Members will be admitted only pursuant to the terms of the operating agreement to be entered into by the Members of the Company, or upon such other terms as are agreed to by members having a majority of the percentage interest in the Company.

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8. **Additional Liability of Members.** Additional capital contributions of the Members may be required, but only upon the vote of a majority of Members pursuant to the terms of an operating agreement to be entered into between the Members of this limited liability company.
9. **Continuity.** The remaining Members of the limited liability company will have the right to continue the business upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member or occurrence of any other event which terminates the continued Membership of a Member in this limited liability company. The return of capital and the distribution of profits shall be determined from the limited liability company's books, as of the effective date of withdrawal, based on the provisions of the regulations, and paid as soon as practicable without diminishing the prospects of the limited liability company's ventures and subject to the limitations of Florida law.
10. **Management.** The business of the company shall be reserved to and conducted under the exclusive management of its Managing Member according to the provisions of an operating agreement to be entered into by the Members of the Company. This is a manager managed company.

Dated: Dec. 12, 2005

By: 
Steve Halegua
MEMBER

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

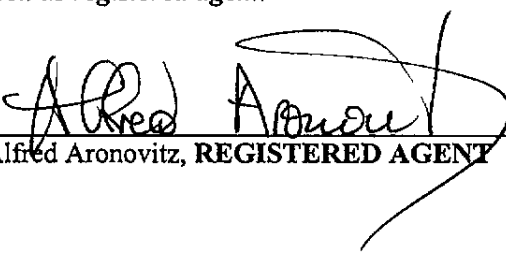
1. The name of the limited liability company is:

JALI, LLC

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

Alfred Aronovitz
11151 S.W. 93rd Avenue
Miami, FL 33176

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.


Alfred Aronovitz, REGISTERED AGENT

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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