

FROM : LAZARUS
Division of Corporations

FAX NO. : 3052201440

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Florida Department of State

Division of Corporations

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DIVISION OF CORPORATIONS

FLORIDA/FOREIGN LIMITED LIABILITY CO.

BLUE RIBBON PARTNERS LLC

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ARTICLE OF ORGANIZATION

OF

BLUE RIBBON PARTNERS LLC

The undersigned hereby subscribes to these Articles of Organization for a Limited Liability Company under the Laws of the State of Florida.

ARTICLE I

The name of this limited liability company is:

BLUE RIBBON PARTNERS LLC

ARTICLE II

The mailing address of the principal office of this limited liability company shall be 530 Santurce Avenue Coral Gables, FL 33143 and such other place or places as the members from time to time may determine.

The name and address of the initial registered agent is:

TAX MANAGEMENT SERVICES CORP
7955 NW 12th Street
Suite 400
Miami, FL 33126

ARTICLE III

The period of duration for the limited liability Company shall be perpetual unless sooner dissolved in accordance with the laws of the State of Florida. The date of existence shall begin upon the filing of these Articles of Organization and upon acceptance by the Secretary of State. This limited liability company may engage in any activity or business permitted under the laws of the United States and the laws of the State of Florida. Without limiting any of the purposes, powers and objects of this limited liability company it is expressly declared and provided that this limited liability company shall have power in carrying on its own business, or for the purpose of accomplishment of any of the purposes or attainment of its objects, to make and perform contracts of any kind and description and to do any and all other acts, to exercise any and all powers either as principal, agent or broker, conferred by the laws of Florida upon limited liability companies, and which a partnership or natural person could do and exercise, and which now or hereafter may be authorized by law.

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ARTICLE IV

The Limited Liability Company shall be managed by the members with voting power prorata to their interest. The right and duties of the members shall be set forth in the regulations of this limited liability company, which are incorporated herein by reference.

The names and addresses of the initial members of this limited liability company are:

Lina Maria Restrepo
18151 NE 31 Street
Apt 1509
Aventura, FL 33160

Victoria M. Hegewisch
530 Santurce Ave
Coral Gables, FL 33143

Maria Tubilla
6400 SW 116 Street
Pinecrest, FL 33156

The name and address of the managing members is:

Lina Maria Restrepo
18151 NE 31 Street
Apt 1509
Aventura, FL 33160

Victoria M. Hegewisch
530 Santurce Ave
Coral Gables, FL 33143

Maria Tubilla
6400 SW 116 Street
Pinecrest, FL 33156

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ARTICLE V

In the event of withdrawal, retirement, bankruptcy or dissolution of a member, or the occurrence of any other event, which terminates the continued membership of a member, this limited liability company shall remain in existence and continue in business pursuant to the applicable provisions of the regulation.

ARTICLE VI

The members of the limited liability Company shall adopt regulations containing all provisions for the regulation and management of this company, which shall be consistent with the law or these articles.

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ARTICLE VII

A member's interest in this limited liability company may be transferred only with the unanimous written consent of all remaining members if the transferee intends to become a member.

ARTICLE VIII

These articles may be amended at any time by the unanimous consent of the members as deemed appropriate to facilitate the accomplishment of the purpose of the Limited Liability Company, and the amendment shall be executed and duly filed with the Florida Department of State.

The undersigned authorized Representatives Elise Robinson Partners LLC and Lina Maria Restrepo, Victoria M. Hegewisch and Maria Tubilla Depose and say:

The above named Limited Liability Company has three members.

Lina Maria Restrepo
Name of Authorized Representative of Member

L-M-R
Signature of Authorized Representative of Member

Victoria M. Hegewisch
Name of Authorized Representative of Member

[Signature]
Signature of Authorized Representative of Member

Maria Tubilla
Name of Authorized Representative of Member

[Signature]
Signature of Authorized Representative of Member

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

PURSUANT TO THE PROVISIONS OF SECTION 608.412, FLORIDA
STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS
THE FOLLOWING STATEMENT IN DESIGNATING THIS REGISTERED
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

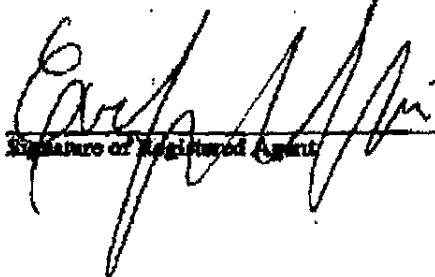
The name of the limited liability company is:

BLUE RIBBON PARTNERS LLC

The name and address of the registered agent and office is:

**TAX MANAGEMENT SERVICES CORP
7935 NW 12th Street
Suite 400
Miami, FL 33126**

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.


Signature of Registered Agent

1/26/06
Date

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STATE OF FLORIDA
DIVISION OF CORPORATE
REGISTRATION

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