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LETTER OF TRANSMITTAL

February 28, 2006

**TO: FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
P.O. Box 6327
Tallahassee, Florida 32314**

**Re: CORRECTED ARTICLES OF ORGANIZATION
The Star Miracle, LLC**

Dear Ms. Cline:

Please find enclosed the following materials per your instructions:

- 1. Your original letter dated January 11, 2006.**
- 2. Document reference sheet.**
- 3. Corrected Articles of Organization.**

If you have any questions regarding these documents, please do not hesitate to contact our offices.

Very truly yours,


Alicia Montijo

Legal Assistant to
Fernando M. Palacios, Esq.

FMP:am
enc. As Listed
CC: File
File #05-234 CO



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 11, 2006

ALICIA MONTIJO
525 EAST STRAWBRIDGE AVENUE
MELBOURNE, FL 32901

SUBJECT: THE STAR MIRACLE CORP., LLC
Ref. Number: W06000001327

We have received your document for THE STAR MIRACLE CORP., LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity cannot include "CORP.," This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on January 9, 2006. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 406A00002102

**ARTICLES OF ORGANIZATION
OF
THE STAR MIRACLE, , LLC MSJ**

The undersigned organizer adopts the following Articles of Organization for the limited liability company named below pursuant to section 608.406 of the Limited Liability Company Act of the state of Florida.

**ARTICLE I
Name**

The name of the Limited Liability Company is The Star Miracle, , LLC. MSJ

**ARTICLE II
Address**

The mailing address and street address of the principal office of the Limited Liability Company are as follows:

Mailing Address:
19 LAS BRISAS WAY
KISSIMMEE, FL
34 743 MSJ

Street Address:
19 LAS BRISAS WAY
KISSIMMEE, FL.
34 743

**ARTICLE III
Registered Office and Agent**

The name and the Florida street address of the registered agent of the Limited Liability Company at the above office are:

MARIO J. GOMEZ
19 LAS BRISAS WAY
KISSIMMEE, FL.
34 743 MSJ

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.



MARIO J. GOMEZ,
Registered Agent

**ARTICLE IV
Management**

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

TITLE:
MANAGING MEMBER

NAME AND ADDRESS
MARIO J. GOMEZ
19 LAS BRISAS WAY
KISSIMMEE, FL
34743 MS3

**ARTICLE V
Effective Date**

The Effective date of this Limited Liability Company is MARCH 1, 2006 MS



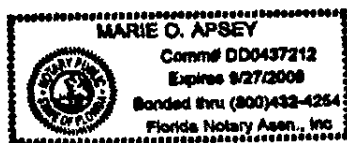
IN WITNESS WHEREOF, the organizer-manager, by the signature below, affirms under penalty of perjury the truth of the matters set in these articles of organization on this 15th day of December, 2005.


MARIO J. GOMEZ,
Organizer/Manager

STATE OF FLORIDA
COUNTY OF BREVARD

On this 15th day of December, 2005, before me, the undersigned officer, personally appeared MARIO J. GOMEZ, who is known to me to be the person whose name is subscribed to the instrument within, and acknowledged that he/she executed the same for the purposes therein described.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.




Notary Public - State of Florida