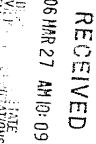
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	_
(Requestor's Name)	
(Address)	<b>-</b>
(Address)	<b></b> -
(City/State/Zip/Phone #)	<b></b>
PICK-UP WAIT MAIL	
(Business Entity Name)	<b></b>
(Document Number)	-
ertified Copies Certificates of Status  Special Instructions to Filing Officer:	- -
LAZARZU GAVE	
AUTHORIZATION BY PHONE TO CHAWE & FECT DATE	
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## LAZARUS CORPORATE FILING SERVICE

3320 SW 87<sup>TH</sup> AVENUE

M

IIAMI, FL 33165 (305) 552-5973	<b>3</b> ⊢∴
	Office Use Only  ENT NUMBER(S), (if known):
CORPORATION NAME(S) & DOCUME	ENT NUMBER(S), (if known):
1. BACO PRODUCTIO	DN LLC
(Corporation Name)	(Document #)
2. (Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
4. (Corporation Name)	(Document #)
Walk in Pick up time 2  Mail out Will wait	Certified Copy  Photocopy  Certificate of Status
NEW FILINGS  Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS  Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS  Annual Report Fictitious Name	REGISTRATION/QUALIFICATION  Foreign Limited Partnership Reinstatement Trademark Other
CD C	Examiner's Initials

CR2E031(7/97)

ARTICLES OF ORGANIZATION FOR FLO	RIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	TOTAL PROPERTY OF THE PROPERTY
Baco Production LL (Must end with the words "Limited Liability Company, "Limited	Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
10305 SW 132ND STREET MIAMI FL 33176	10305 Sw 132 NO Street MIAMI FC 33176
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature: red Agent. You must designate an individual or another
The name and the Florida street address of the report of t	gistered agent are:
Florida street addre Migmi City, State, an	132 M Staret ess (P.O. Box NOT acceptable)  FL 33/76 d Zip
liability company at the place designated in the registered agent and agree to act in this capacity. statutes relating to the proper and complete perj	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tred agent as provided for in Chapter 608, F.S

(CONTINUED) Page 1 of 2

gnature (REQUIRED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR-manager	Juan Carlos La Fuente- 10305 SW 132ND STATIT Miani F1 33176-6055	
MGR = manager	Technology SPA Inc 10305 SW 132Nd START. Wiami F1 33176 -6055	
MGRAN Honging Member	Juan Carlos Laguentes. 10305 Sus 132NO STAGET MIAMI FL 33176-6055	
MGRM-Managing Membe		
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the date of filing: \( \frac{1}{27} \) \( \frac{1}{20} \) (OPTIONAL)  If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)		
REQUIRED SIGNATURE:	l. fact	
Jac   1912		