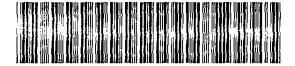
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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
<u> </u>
(D., (E.,), P. (H.), I.
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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R.M. LeRoux Consulting

Accounting * Bookkeeping Consulting * Payroll Income Tax - Federal & States

507 Herbert Street, Suite A, Port Orange, FL 32129-3845 Phone 386 788-7264 * Toll Free 866 788-7264 * Fax 386 788-1958 * Email: rleroux@outdrs.net

02/18/2006

Florida Department Of State Division Of Corporations Corporate Filings P. O. Box 6327 Tallahassee, FL 32314

Please file the enclosed Articles Of Organization for the following:

A Onyx, LLC

Enclosed is my check number 5432 in the amount of \$160.00 for the following:

Filing Fee 125.00 Certified Copy 30.00 Certificate Of Status 5.00

Total 160.00

Thank You,

R.M. LeRoux

R. M. LAM

ARTICLES OF ORGANIZATION OF A Onyx, LLC

The undersigned, pursuant to Section 608.407, Florida Statutes (2002), files the following Articles Of Organization of LLC and states as follows:

Article I

The name of the limited liability company is: A Onyx, LLC

Article II

The mailing address and the principal office of the limited liability company shall be: 1265 South Beach Street, Apt. 2112

Daytona Beach, FL 32114

Article III

The name and address of the initial Registered Agent for service of process of the limited liability company is:

Ashley Hoskins

1265 South Beach Street, Apt. 2112 Daytona Beach, FL 32114

A written statement required by Section 608-415, Florida Statutes (2002) accompanies these Articles of Organization

Article IV

The limited liability company shall be managed by it's members.

Ashley Hoskins, MGRM - A Member

Date

DESIGNATION OF REGISTERED AGENT OF

A Onyx, LLC

I hereby accept my designation as registered agent and agree to serve as the registered agent of LLC. I hereby state that I am familiar with and accept the duties and responsibilities as registered agent for LLC.

Ashlev Hoskins, Registered Agent

5/3/0Ce Date