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**Florida Department of State
Division of Corporations
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

Division of Corporations
Fax Number : (850) 205-0383
From:
Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

FLORIDA/FOREIGN LIMITED LIABILITY CO.

henriben llc

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$155.00

successor is selected and qualified in accordance with the Regulations is:

Andres J. Iriondo
901 Ponce de Leon Blvd., Suite 501
Coral Gables, Fl. 33134

ARTICLE III

NEW MEMBERS

No additional members shall be admitted to the Company, and no member may transfer his or her interest in the Company, except, in either case as set forth in the Regulations, and if there are no Regulations then in effect, by unanimous consent of all of the members. No transferee shall have the right to participate in the management of the business and affairs of the Company or become a member upon such terms and conditions as set forth in the Regulation, and if no regulations are in effect, upon the unanimous consent of all of the members. Contributions of new members shall be determined as of their time of admission to the Company.


ARTICLE IX

DISOLUTION AND MEMBERS RIGHTS TO CONTINUE BUSINESS

The company shall be terminated and dissolved upon:

- (A) the vote of all members holding an interest in the Company;
- (B) the expiration of the term of the Company; or
- (C) the death, retirement, or resignation of a member, if the remaining members do not vote unanimously to continue the business of the Company.

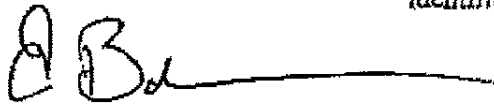
IN WITNESS WHEREOF, the undersigned have caused these Articles of Organization to be executed on the 6th day of September, 2006 effective upon filing same with the Florida Department of State.


Andres J. Iriondo

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CLERK OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA)
) SS:
COUNTY OF MIAMI DADE)

The foregoing instrument was acknowledged before me this 6th day of September 2006, by
Andres J. Iriondo, as Manager, who did execute the foregoing Articles of Organization as
manager, who is personally known to me or produced _____ as
identification..



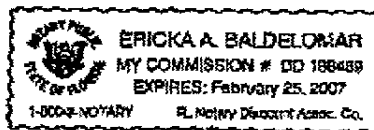
Signature - NOTARY PUBLIC

Ericka Baldeomar
Printed Name of Notary Public

02/25/07
Commission expires:

Printed Name of Notary Public

Commission expires:



SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

**PURSUANT TO THE PROVISION OF SECTION 608.415 or 608.507, 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: Honriben, L.L.C
2. The name and the Florida street address of the registered agent is:

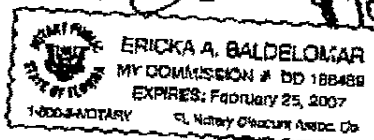
Andres J. Iriondo
901 Ponce de Leon Blvd, Suite 501
Coral Gables, Fl. 33134

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in the certificate, I hereby accept 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 am familiar with and accept the obligations of my position as registered agent.


Andres J. Iriondo



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