

Division of Corporations

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Florida Department of State  
Division of Corporations  
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TALLAHASSEE, FLORIDA

2006 OCT -5 P 12:43

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To:

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.

cavkav llc

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DIVISION OF CORPORATION

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**ARTICLES OF ORGANIZATION FOR FLORIDA  
LIMITED LIABILITY COMPANY**

**ARTICLE I - NAME**

The name of the Limited Liability Company is CAVKAV LLC.

**ARTICLE II - ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is:

525 BAYPOINT ROAD

MIAMI, FL 33137

**ARTICLE III MANAGEMENT**

The Limited Liability Company is not to be managed by the members. The name and address of the Manager:

PALM TREE CONSULTING CORPORATION

525 BAYPOINT ROAD

MIAMI, FL 33137

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**ARTICLE IV- MEMBERS RIGHTS TO CONTINUE BUSINESS**

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall by unanimous consent of all the members.

**ARTICLE V - ADMISSION OF ADDITIONAL MEMBERS**

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall by unanimous consent of the members.

**ARTICLE VI - DURATION**

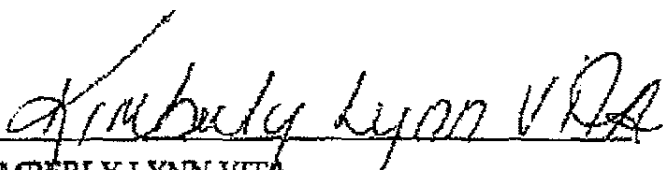
The period of duration for the Limited Liability Company shall be until October 31, 2048.

**ARTICLE VII - MEMBERSHIP CONTRIBUTION**

The undersigned member or authorized representative of CAVKAV LLC. Deposits and says:

1. the above named limited liability company has at least two members;
2. the total amount of cash contributed by the member(s) is \$1,000.00;

3. if any, the agreed value of property other than cash contributed by member(s) is \$0. A description of the property is attached and made a part hereto.
4. the total amount of cash or property anticipated to be contributed by member(s) is \$1,000. This total includes amounts from 2 and 3 above.



NAME: KIMBERLY LYNN VITA

Signature of member authorized or representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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TALLAHASSEE, FLORIDA

Howdy

PURSUANT TO THE PROVISIONS OF CHAPTER 608, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF 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 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.

Date \_\_\_\_\_