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To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name

: FOWLER, WHITE, BURNETT, ET AL

Account Number: 071250001512

Phone : (305) 789-9200

Fax Number : (305) 789-9201

FLORIDA/FOREIGN LIMITED LIABILITY CO.

4 DRIVEN AMIGOS, LLC

Certificate of Status	0		
Certified Copy	1		
Page Count	03		
Estimated Charge	\$155.00		

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ARTICLES OF ORGANIZATION

OF

4 DRIVEN AMIGOS, LLC

ARTICLE I

The name of the limited liability company formed hereby is 4 DRIVEN AMIGOS, LLC (the "Limited Liability Company").

ARTICLE II

The duration of the Limited Liability Company shall be perpetual.

ARTICLE III

The principal office and mailing address of the Limited Liability Company shall be as follows:

1100 N.W. 73rd Street Miami, Florida 33150

ARTICLE IV

The Registered Agent of the Limited Liability Company and his street address in the State of Florida are as follows:

Stuart H. Altman, Esq. 1395 Brickell Avenue, 14th Floor Miami, Florida 33131

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SECRETARY OF STATE DIVISION OF CORPORATION

Audit No. H07000016153 3

ARTICLE Y

The Limited Liability Company shall be member-managed.

Stuart H. Altman,

as Authorized Representative of the Members

STATE OF FLORIDA)	<i>.</i>			,	
COUNTY OF MIAMI-DADE						
Before me personally app Members, who is personally kn as identification, to be	eared Stu lown to n	nc, or 🗆 wh	man, as / o produce	Authorized d	Represen	
In witness whereof I have h	iereunto s	set my hand	l and offic	ial seal thi	s 18 d	ay of

Notary Public DOEN MARCUS

My Commission expires:

NOTARY PUBLIC-STATE OF FLORIDA
Doris Marcus
Commission # DD446387
Expires: AUG. 02, 2009
Bonded Thru Atlande Bonding Co., Inc.

Audit No. H07000016153 3

Audit No. H07000016153 3

CERTIFICATE OF DESIGNATION OF RESIDENT AGENT AND ACCEPTANCE OF DESIGNATION

Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned limited liability company organized under the laws of the state of Florida, submits the following statement in designating its Registered Office and Registered Agent in the State of Florida:

1. The name of the limited liability company is 4 DRIVEN AMIGOS, LLC.

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2. The name and address of the Registered Agent and Office is:

Stuart H. Altman, Esq.
1395 Brickell Avenue, 14th Floor
Miami, Florida 33131: Annual State Control of the Contr

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 the appointment as Régistered 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.

Stuart H. Altman, Registered Agent

Date: 1/18/07

4 DRIVEN AMIGOS, LLC

Stuart H. Altman,

as Authorized Representative

of the Members

Audit No. H 07000016153 3

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