

Jan 18, 2007 2:00PM

A1A CORPORATE SERVICES

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Division of Corporations

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To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : I20010000247
Phone : (800)494-3124
Fax Number : (305)675-2811

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Honeybee International LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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

In compliance with Chapter 608, F.S.

ARTICLE I: NAME

The name of the Limited Liability Company is:

HONEYBEE INTERNATIONAL LLC

ARTICLE II: Address

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

500 NORTH HIATUS RD., SUITE 107

PEMBROKE PINES, FL 33026

**ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE & REGISTERED
AGENT SIGNATURE**

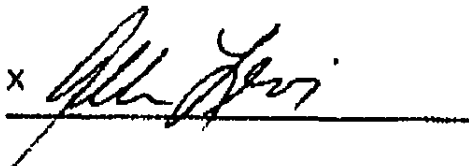
The name and the Florida street address of the registered agent are:

ALAN LEVI

20590 WEST DIXIE HIGHWAY

NORTH MIAMI BEACH FL 33180

Having been named as registered agent 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 as provided for in Chapter 608, F.S.

x 

ALAN LEVI/ Registered Agent's Signature

ARTICLE IV: MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

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HONEYBEE INTERNATIONAL LLC

ARTICLE V: MEMBERS (optional)

Managing Member:

ROBERT H. SHERMAN, MD

500 NORTH HIATUS RD., SUITE 107

PEMBROKE PINES, FL 33026

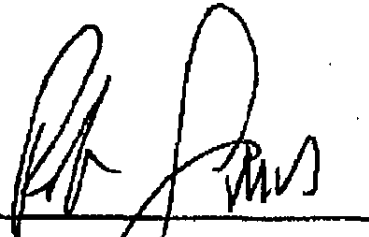
Managing Member:

SERGIA S. SHERMAN

500 NORTH HIATUS RD., SUITE 107

PEMBROKE PINES, FL 33026

X



Signature of a member or an authorized 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.)

ROBERT H. SHERMAN, MD

Typed or printed name of signee

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