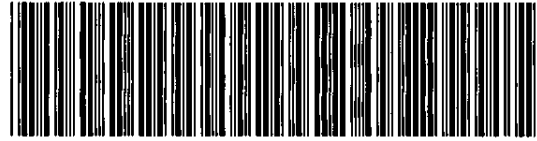


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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

REINSTATEMENT

3/1/07

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Charter Number Only

3/1/07

Rolando Leiva

Requestor's Name

7400 SW 50 TERR

Address

Miami, FL 33155#302

City

State

ZIP

Phone

(305) 663-1011

CORPORATION(S) NAME

AAFA, LLC

VALIDATION ONLY

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TALLAHASSEE, FLORIDA

REINSTATEMENT

3/1/07

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- Reinstatement
- Certified Copy
- Call When Ready
- Walk In
- Amendment
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- Reservation
- Photo Copies
- Call If Problem
- Will Wait
- Merger
- Mark
- Other LLC
- Change of Registered Agent
- Certificate Under Seal
- After 4:30
- Mail Out



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Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

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

Date: February 16, 2007

ARTICLE I – NAME:

The name of the Limited Liability Company is:

AAFA, LLC

ARTICLE II – ADDRESS:

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

9492 NW 49 Lane
Miami, Florida 33178

The mailing address of the Limited Liability Company is:

P.O. Box 45-1308
Miami, Florida 33245

**ARTICLE III – REGISTERED AGENT, REGISTERED OFFICE, &
REGISTERED AGENT'S SIGNATURE:**

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

ARMANDO MARTIR
Name

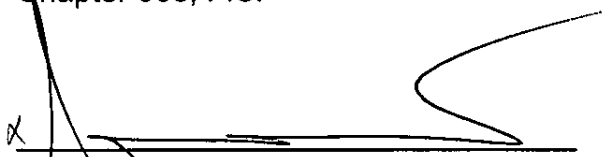
9492 NW 49 LANE
Florida Street Address

MIAMI, FL 33178
City, State, and Zip

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 3/1/07

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 as provided for in Chapter 608, F.S.


Registered Agent's Signature

ARTICLE IV – MANAGEMENT

The Limited Liability Company is to be considered a multiple manager LLC and is therefore a MULTIPLE MANAGER LLC company. The name and address of each initial MANAGER or MANAGER MEMBER is as follows:

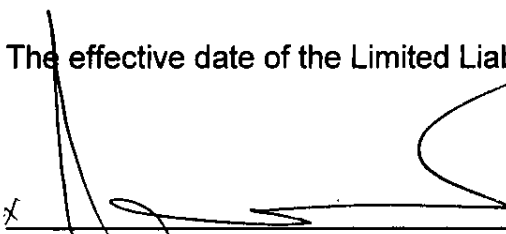
<u>Title:</u>	<u>Name and Address:</u>
Managing Member	ARMANDO MARTIR 9492 NW 49 Lane Miami, Florida 33178
Managing Member	ANA MARTIR 9492 NW 49 Lane Miami, Florida 33178
Member	FRANCES MARTIR 9492 NW 49 Lane Miami, Florida 33178
Member	ARMANDO J. MARTIR 9492 NW 49 Lane Miami, Florida 33178

ARTICLE V - BUSINESS DEDUCTIONS

Per IRS regulations the corporation may pay and deduct the health insurance and medical expenses of its directors and employees. Additionally, business auto expenses may be reimbursed to directors and employees and thus deducted from current operations.

ARTICLE VI – EFFECTIVE DATE

The effective date of the Limited Liability Company shall be: March 1st, 2007.



Signature of 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



ARMANDO MARTIR
Member/Manager of LLC

February 16, 2007