

05/18/2007 11:07

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BERRIZ&GIRALDO

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Division of Corporations

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Florida Department of State
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To:
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From:
Account Name : BERRIZ & GIRALDO P.A.
Account Number : I19990000017
Phone : (305)485-9300
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

GJC SERVICES, LLC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

107 000 135 9593

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY
COMPANY

OF

GJC SERVICES, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

GJC SERVICES, LLC.

ARTICLE II - ADDRESS

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

5795 NW 109 AVE # 8
MIAMI, FL. 33178

The mailing address shall be:

P.O BOX 833198
MIAMI, FL. 33283-3198

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED
AGENT'S SIGNATURE:

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

CELIA M. MEDINA

5795 NW 109 AVE # 8

Florida street address (P.O.BOX NOT acceptable)

MIAMI, FL. 33178
City, State, and Zip

CLARA GIRALDO P.A.
4080 SW 84 AVE SUITE C
MIAMI, FL 33185
(305) 485-9300

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TALLAHASSEE, FLORIDA

407 000 135 9593.

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 managed by one manager or more managers and is, therefore, a manager - managed company.

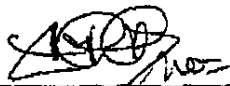
CELIA M. MEDINA
5795 NW 109 AVE # 8
MIAMI, FL. 33178

MANAGER

GERMAN E. GUZMAN
5795 NW 109 AVE # 8
MIAMI, FL. 33178

MANAGER

(An additional article must be added if an effective date is requested)



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.)

CELIA M. MEDINA

Typed or printed name of signee

407 000 135 9593.

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