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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NRC

Michael William Skop, P.A.

Attorney at Law

**12865 West Dixie Highway
Second Floor
North Miami, FL 33161**

Michael William Skop, Esquire

Telephone (305) 899-8588

Facsimile (305) 892-8434

June 1, 2007

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

Re:US Alliance Group, LLC

Dear Sir/Madam:

Enclosed please find our check in the amount of \$125.00, along with the Articles of Organization of US Alliance Group, LLC.

If you have any questions regarding this matter, please do not hesitate to call our office.

Very truly yours,

Michael William Skop/P.A.

Michael Skop
MWS/klw
Enclosures

divcorp.ltr

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

US ALLIANCE GROUP, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

1460 N.W. 107th Avenue

Suite L

Miami, Florida 33172

Mailing Address:

1460 N.W. 107th Avenue

Suite L

Miami, Florida 33172

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Michael William Skop, Esq.

Name

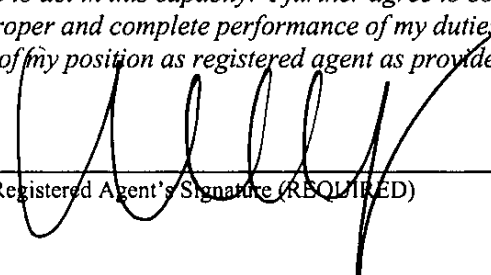
12865 West Dixie Highway

Florida street address (P.O. Box **NOT** acceptable)

North Miami, FL 33161

City, State, and Zip

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 (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Baron Sedaghat

1460 N.W. 107th Avenue, Suite L

Miami, Florida 33161

MGRM

Bey Sedagat

1460 N.W. 107th Avenue, Suite L

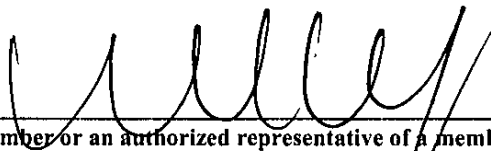
Miami, Florida 33161

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



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.)

Michael W. Skop, ESQ.

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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