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(Requestor's Name)

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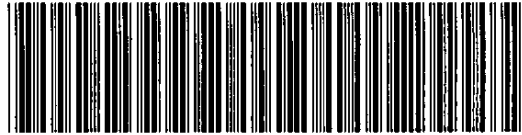
(Business Entity Name)

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TALLAHASSEE, FLORIDA

BK 12/4

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Almeida, LLC

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- Art of Inc. File _____
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- Corp Record Search _____
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- UCC 11 Search _____
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Signature

Requested by:

wc 12/4 11:00

Name

Date

Time

ARTICLES OF ORGANIZATION

FOR

ALMEEDVI, LLC

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, for the purpose of forming a company under the Florida Limited Liability Act, hereby adopts the following Articles of Organization.

ARTICLE I: NAME

The name of the company is **ALMEEDVI, LLC**

ARTICLE II: PRINCIPAL OFFICE

The principal office and mailing address of the company is **4275 31st PI SW, Naples, FL 34116**

ARTICLE III: MANAGEMENT

The company will be a manager managed Limited Liability Company.

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is **Marc L. Shapiro, P.A., Attorney at Law, 720 Goodlette Rd N, Suite 304, Naples, FL 34102**

ARTICLE V: MANAGING MEMBERS AND MEMBERS

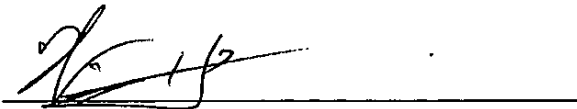
The name and address of the initial Managing Members and Members of the company are:

Victoria Moreno, Managing Member, 4275 31st Pl SW, Naples, FL 34116

Eduardo B. Moreno, Member, 4275 31st Pl SW, Naples, FL 34116

The undersigned has executed these Articles of Organization this 4th day of December 2007.

"Your Capital Connection, Inc. by, Weimar Lopez, Client Representative"

A handwritten signature in black ink, appearing to read 'Weimar Lopez', is written over a solid horizontal line.

Authorized Representative

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 608.415, Florida Statutes, the mentioned company, organized under the laws of the State of Florida, submits the following statement in designating the registered agent/registered office, in the State of Florida.

1. The name of the company is: AL MEEDVI, LLC

2. The name and address of the registered agent and office is: Marc L. Shapiro, P.A.
ATTORNEY AT LAW
720 Goodlette Rd N - Suite 304
Naples, FL 34102

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED 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.



Marc L. Shapiro, P.A.
ATTORNEY AT LAW
720 Goodlette Rd N - Suite 304
Naples, FL 34102