Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850) 617-6383

Effective Date 02/12/08

Exom:

Account Name : FASTRIT CORPORATE OUTFITS

Account Number: 071001002335

Phone : (305)599-0839

Fax Number

: (305)716-0346

FLORIDA/FOREIGN LIMITED LIABILITY CO.

PLAN B IMPORT/ EXPORT, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

FEB 1 3 2008

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Corporate Filing Menu

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Plan B Import/ Export, LLC

(Must end with the words "Limited Linbility Company, "I.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

•	•
185 S.W. 7 Street	185 S.W. 7 Street
A. J. A. M. J.	
Apt. 2514	Apt 2514
14 b. 44.484	141 22 20465
Mlami, FL 33130	Mlami, FL 33130

ARTICLE III - Registered Agent, Registered Office. & Registered Agent's Signature: (The Limited Liability Company cannot save as its own Registered Agent. You must designate an individual or another business entity with an active Morida registration.)

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

Carlos E. Garcia CPA, P.A.

Name

Effective Date 02/12/08

10691 N. Kendall Drive, Suite 301

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

Miami, FL 33176

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 can 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) Page 1 of 2

<u>Title:</u> "MGR" - Manager	Name and Address:	
"MGRM" = Managing Member	· · · · · · · · · · · · · · · · · · ·	, •
MGRM	Rodolfo J. Egano	
	185 S.W. 7 Street, Apt. 2514	
	Miaml, FL 33130	·
MGRM	Enrique J. Egana	
	185 S.W. 7 Stroet, Apt. 2514	
	Miemi, FL 33130	
		,
		
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	6	

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: February 12, 2008. (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), Plorida Statutes, the execution of this document constitutes an affirmation under the penaltics of parjury that the facts stated herein are true.)

Carlos E. Garcia CPA, P.A.

Typed or printed name of signoc

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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