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Division of Corporations

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From:

Account Name : ARAZOZA, COMAS, DE TORRES & FERNANDEZ-FRAGA

Account Number : 076624003440 Phone : (305)444-6226

Fax Number : (305)442-4829

FLORIDA/FOREIGN LIMITED LIABILITY CO.

LETICIA R. VALDES LLC.

Certificate of Status Certified Copy Page Count 03 Estimated Charge \$130.00

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Corporate Filing Menu

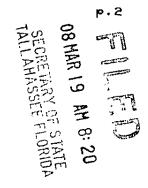
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ARTICLES OF ORGANIZATION

OF.

LETICIA R. VALDES LLC.



The undersigned members to these Articles of Organization hereby associate themselves together to form a Limited Liability Company under the laws of the State of Florida.

ARTICLE I NAME

The name of this Limited Liability Company is: LETICIA R. VALDES LLC.

ARTICLE II GENERAL NATURE OF BUSINESS

The Limited Liability Company may engage in any activity or business permitted under the laws of the United States and of the State of Florida.

ARTICLE III TERM OF EXISTENCE

This Limited Liability Company is to exist perpetually. The Limited Liability Company's business will continue without regard to the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company.

ARTICLE IV

The principal office and mailing address of this Limited Liability Company in the State of Florida is 6301 CABALLERO BLVD., CORAL GABLES, FL 33146. The Board of Managers may from time to time move the principal office to another address in Florida.

ARTICLE V REGISTERED OFFICE, REGISTERED AGENT

That LETICIA R. VALDES LLC., desiring to organize under the laws of the State of Florida, with its principal office as indicated in the Articles of Organization at the County of Miami Dade, State of Florida, hereby designates LETICIA R. VALDES, as its Registered Agent to accept services within the State. The registered office of the Limited Liability Company shall be 1390 SOUTH DIXIE HIGHWAY, SUITE 2120 CORAL GABLES, FL 33146.

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ARTICLE VI MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager - managed company. The Initial Manager shall be

LETICIA VALDES

of

6301 CABALLERO BLVD., CORAL GABLES, FL 33146

WITNESS the hand and seal of the Manager in Miami Dade County, State of Florida, this day of March, 2008.

The Manager

LETICIA VALDES

) SS:		
COUNTY OF MIAMI-DADE)		
PERSONALLY appeared bet VALDES LLC., who produced _ personally known to me, who being t	fore me, LETIÇIA	R. VALDES, the N	Manager of LETTCIA R
VALDES LLC., who produced	personally kn	OUTh :	as identification or i
personally known to me, who being h	y me first duly sw	om, acknowledges	that he signed the same
WITNESS my hand and seal 2008.	l at Miami Dade (County, Florida thi	day of March
2008.			

Laura Kohn
Commission #DD319617
Expires: May 16, 2008
Bonded Thru
Atlantic Bonding Co., Inc.

NOTARY PUBLIC STATE OF FLORIDA AT LARGE

My commission expires:

STATE OF FLORIDA

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CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In compliance with Section 48.091, Florida statutes, the following is submitted:

FIRST: That LETICIA R. VALDES LLC., desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at the County of Broward, State of Florida, designates LETICIA R. VALDES, as its Registered Agent to accept services within the State. The registered office of the Limited Liability Company shall be 1390 SOUTH DIXIE HIGHWAY, SUITE 2120 CORAL GABLES, FL 33146.

Having been named to accept service of process for the above stated Limited Liability Company, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

The Registered Agent

LETICIA R. VALDES

Date: March _ _ ___ 2008

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SECRETARY OF STATI