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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 DEC - 1 AM 10:28

FILED

JEROME J. KAVULICH, ESQ.
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EMAIL: JJK@KAVULAW.COM

November 30, 2009
Mailed by FedEx

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

RE: Doñas, LLC

Dear Sir/Madam:

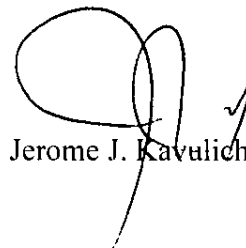
Enclosed please find the original Articles of Organization for the formation of Doñas, LLC, a Florida Limited Liability Company. We are requesting that a certified copy of the Articles of Organization be provided by return mail.

Upon filing, please return the certified copy to me at the above address. A self-addressed, stamped envelope is enclosed for that purpose.

I also enclose my client's check payable to the Division of Corporations in the amount of \$155 representing the filing fee of \$125 and the \$30 fee for certification.

If you should have any questions, please contact me at the above telephone number.

Very Truly Yours,



Jerome J. Kavulich

JJK/lp

cc: client

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Doñas, LLC

(Must end with the words "Limited Liability Company," "L.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:

8900 SW 114th Street

Miami, Florida 33176

Mailing Address:

8900 SW 114th Street

Miami, Florida 33176

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:

Monica Pidre

Name

8900 SW 114th Street

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

Miami, Florida 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 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

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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:

MGRM

Monica Pidre
8900 SW 114th Street
Miami, Florida 33176

MGRM

Andrea Askowitz
3024 Kirk Street
Miami, Florida 33133

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

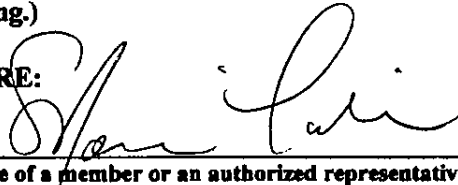
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(Use attachment if necessary)

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.)

Monica Pidre

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)