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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:		; <u> </u>
10.	Division of Corporations	SS
	Fax Number : (850)617-6381	111-4
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From:		
	Account Name : LAZARUS CORPORATE FILING SERVICE, INC.	12.00 13.00 10.00
	Account Number : I200000000019	٠٠٠.
	Phone : (305)552-5973	
	Fax Number : (305)675-5944	

FLORIDA LIMITED LIABILITY CO. THE LARA COMPANY LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00



Email Address:

ARTICLES OF ORGANIZATION FOR

ARTICLE I - Name: The name of the Limited Liability Company is:

FLORIDA LIMITED LIABILITY COMPANY

ナルビ LARA ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (!he Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration) CORAC GABLES A. 33133 ARTICLE IV The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)

Required Signatures:

Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution (1) this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

WILFRED RAMON CARA
Typed or printed name of signee

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 herely 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 605, F.S..

Registered Agent's Signature (REQUIRED)