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Email Address: DianeA@sandsncompanycpas.com

FLORIDA LIMITED LIABILITY CO. P&A International LLC

Certificate of Status	1
Certified Copy	0
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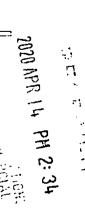
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	P&A Ir	nternational LLC
	(Must end with the word	ds "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Addr The mailing address a		principal office of the Limited Liability Company is:
Principal Office Add	dress:	Mailing Address:
16403 Diamond	Place	16403 Diamond Place
Weston, FL 333	31	Weston, FL 33331
		red Office, & Registered Agent's Signature:
(The Limited Liabilit another business enti		e as its own Registered Agent. You must designate an india registration.)
(The Limited Liabilit another business enti	y Company cannot serve ity with an active Florida	e as its own Registered Agent. You must designate an indi a registration.)
(The Limited Liabilit another business enti	y Company cannot serve ity with an active Florida orida street address of the	e as its own Registered Agent. You must designate an indi a registration.)
(The Limited Liabilit another business enti	y Company cannot serve ity with an active Florida orida street address of the	e as its own Registered Agent. You must designate an indi a registration.) e registered agent are: Name
(The Limited Liabilit another business enti	y Company cannot serve ity with an active Florida orida street address of the Martial Pierre 16403 Diamond	e as its own Registered Agent. You must designate an indi a registration.) e registered agent are: Name
(The Limited Liabilit another business enti	y Company cannot serve ity with an active Florida orida street address of the Martial Pierre 16403 Diamond	e as its own Registered Agent. You must designate an india registration.) e registered agent are: Name Place

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 605, F.S.

Registered Agent's Signature (REQUIRED)

Martial Pierre

MartaPerre

(CONTINUED)

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H20000109480

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager AMBR	Martial Pierre
AWDK	16403 Diamond Place
	Weston, FL 33331
AMBR	Allaix Augustin
AMDI	20 Clifford Street
	Lynbrook, NY 11581
(Use attachment if necessary)	
ective date is listed, the date must b of filling.)	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 90 days
ective date is listed, the date must be filing.) E VI: Other provisions, if any. REOUIRED SIGNATURE:	e specific and cannot be more than five business days prior to or 90 da
ective date is listed, the date must be filing.) E VI: Other provisions, if any. REOUIRED SIGNATURE:	e specific and cannot be more than five business days prior to or 90 da
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REQUIRED SIGNATURE: Signature of a (In accordance with sectionstitutes an affirmation 1 am aware that any fall	a member or an authorized representative of a member. sino 605.0203 (1) (b), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true. se information submitted in a document to the Department of State ee felony as provided for in s.817.155, F.S.) Martial Pierre
REQUIRED SIGNATURE: Signature of a (In accordance with sections and affirmation of a nature and a nature a nature and a n	a member or an authorized representative of a member. stion 605.0203 (1) (b), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true. se information submitted in a document to the Department of State ee felony as provided for in s.817.155, F.S.) Martial Pierre Typed or printed name of signee
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