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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : LYONS & LYONS, P.A.  
Account Number : I20030000061  
Phone : (239)948-1823  
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Email Address: richard.lyons@lyons-law.com

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FLORIDA LIMITED LIABILITY CO.

~~CASA CIELO, LLC~~ RASCACIELO, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
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ARTICLES OF ORGANIZATION  
OF  
RASCACIELO, LLC

ARTICLE I - NAME

The name of the limited liability company is RASCACIELO, LLC. ("company").

ARTICLE II - ADDRESS

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

Principal Office Address:  
2745 First Street, #2203  
Fort Myers, Florida 33916

Mailing Address:  
2745 First Street, #2203  
Fort Myers, Florida 33916

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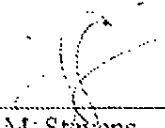
ARTICLE III - REGISTERED AGENT,  
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

L&L PARA, Ltd. Co.  
27911 Crown Lake Boulevard, Suite 209  
Bonita Springs, Florida 34135

*Having been named as registered agent and to accept service of process for the above suited 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.*

L&L PARA, Ltd. Co., a  
Florida limited liability company

By:   
Linda M. Stevens  
Its: Manager

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ARTICLE IV - MANAGERS OR MEMBERS

The name and address of each person authorized to manage and control the Limited Liability Company:

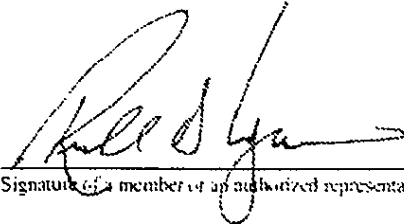
Title:  
"MGR" = Manager  
"AMBR" = Authorized Member

Name and Address:

MGR

Harold R. Gonzalez Carrillo  
2745 First Street, #2203  
Fort Myers, Florida 33916

REQUIRED SIGNATURE:



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

This document is executed in accordance with section 605.0203(1)(b), Florida Statutes. 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.

Richard D. Lyons  
Typed or printed name of signee

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