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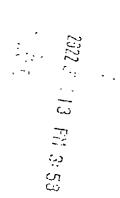
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COVER LETTER

TO:	New Filing Se Division of Co				
orth the	1787	thines, L.L.C.			
SUBJEC	JI:	Nai	ne of Limited	Liability Company	
The encl	osed Articles of	f Organization and	fee(s) are sub	mitted for filing.	
Please re	turn all corresp	ondence concernir	g this matter t	o the following:	
	Matthew Bi	erwagen			
		· · · · · · · · · · · · · · · · · · ·	Na	ime of Person	
			Fi	rm/Company	
	2000 NE 52	nd St.			
		·		Address	
	Fort Laudere	dale. Florida, 3330	8		
	mcbmachines	(Dumail com	City/Si	ate and Zip Code	
			be used for fi	uture annual report notifica	ution)
For further	information co	oncerning this matt	er, please call:		
	Matthew Bic	rwagen	954 at (5521081	
	Nam	ne of Person	Area C		one Number
Enclosed	is a check for t	he following amou	nt:		
	00 Filing Fee	□\$130.00 Filin Certificate of S	g Fee &	□\$155.00 Filing Fee & Certified Copy ditional copy is enclosed)	■\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed
	Mailin	ng Address		Street Address	٠
	New F	iling Section		New Filing Section 1	
		on of Corporations		The Centre of Talla 2415 N. Monroe Su	
		lox 6327 assee, FL 32314		Tallahassee, FL 323	•

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

MCB Machines, L.L.C. (Must contain the words	"Limited Liability Company, "L.L.C.," or "LLC.")
TTICLE II - Address: e mailing address and street address of the p	orincipal office of the Limited Liability Company is:
Principal Office Add	ress: Mailing Address:
2000 NE 52nd St.	2000 NE 52nd St.
	Fort Lauderdale, FL 33308

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

Matthew Bierwagen		
	Name	
2000 NE 52nd St		
Florida street address	s (P.O. Box <u>NOT</u> ac	rceptable)
Fort Lauderdale	FL	33308
City	State	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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMDD	Matthew Bierwagen
AMBR	2000 NF 52nd St.
	Fort Lauderdale, FL 33308
	
(Use attachment if necessary)	
tument's effective date on the Depurti LE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	17.
Signature of	member or an authorized representative of a member.
This didment is a	Recuted in accordance with section 605.0203 (1) (b), Plorida Statutes.
I am aware that any	to the Line of State
	false information submitted in a document to the Department of State
constitutes a third d	false information submitted in a document to the Department of State legree felony as provided for in s.817.155, F.S.
	e false information submitted in a document to the Department of State legree felony as provided for in s.817.155, F.S.
constitutes a third d	representation submitted in a document to the Department of State legree felony as provided for in s.817.155, F.S.
	e false information submitted in a document to the Department of State legree felony as provided for in s.817.155, F.S.
	erwagen Typed or printed name of signee
Matthew Bio	erwagen Typed or printed name of signee Filing Fees:
Matthew Bir \$125.00 Filing Fee for Articles o	erwagen Filing Fees: of Organization and Designation of Registered Agent
Matthew Bio	erwagen Typed or printed name of signee Filing Fees: of Organization and Designation of Registered Agent all)