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īo:

Civision of Corporations Fax Number : (850)617-6381

From:

Account Name : LINO IMEPE Account Number : 120230000094 Phone : (614)579-1707

Fax Number : (305)602-9816

Enter the email address for this business entity to be used for future annual report mailtings. Enter only one email address please.

Email Address: UNLEOSA@GMAIL.COM

FLORIDA LIMITED LIABILITY CO. BOTANICA IFABIYII LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is: (Must end with the usords "Limited Liability Company, "L.L.C.," or "LLC.")

BOTANICA IFABIYII LLC

ARTICLE II - Address:

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

CARLOS M BETANCOURT

8897 NW 108 LN HIALEAH FL 33018

ARTICLE III - Registered Agent, Registered Office:

The name and the Florida street address of the registered agent are: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another husiness entity with an active Florida registration.)

CARLOS M BETANCOURT, 8897 NW 108 LN HIALEAH FL 33018

ARTICLE IV-

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

CARLOS M BETANCOURT, MGR.

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Required Signatures:

To, Division of Corporations Division of Corporations

Carlos Betancourt

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

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of 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.

CARLOS M BETANCOURT

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 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..

Carlos Betancourt

Registered Agent's Signature (REQUIRED)

ONVISION OF CORPORATION

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