MIRON D. MUNNS KRITII N. WATERS MARY E. WAITE 770 DELTONA BOULEVARD 250 NORTH ORANGE AVENUE BUITE C ELEVENTH FLOOR MAURERI A. BELL SCOTT G. ALEXANDER PATRICIA L. DAUGHERTY RIGHARD E. WHITAKEN DELTONA, FLORIDA SETEB POST OFFICE BOX 2507 TELEPHONE (ACT) 488-1814 PAX:1407) 648-869 TRLEPHONE (407) 850-5200 FAX (407) 000-0701 TOUS E. COPELAND BUSAN PIPEN ALLAN MARK S. WALNER PAMBLA BOUNDS GLEEN LIBA A. BEPUSITO 233 NORTH BERMUDA AVENUE MIGHAEL W. UNOWYCHENHO JAMES N. PLAGG LEHDIA M. DIAJ, PH.D. • RETIREO MEPLY TO

218 S.E. FT. KING STREET GOALA, FLORIDA 34471 TELEPHONE (392) 690-7400 FAX (352) 629-9808

MARRIN III, HAIIN MIIONDA L. MARR

INVESTIGATOR

KINDIMMER, PLONIDA 3474) TELEPHONE (407) 670-19/9 FAX (407) 870-8419

P.O. BOX 2007 ORLANDO, PLORIDA SESOR October 7, 1996

106 JULIA BINEST TITUSVILLE, FLORIDA 34786 TELEPHONE (407) 284-1800 FAX (407)268-1624

Department of State Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

RE: ACT AMERICA, L.C.

Dear Sir/Madam;

900001965069 -10/08/96--01133--001 ****346.25 ****346.25 ****346.25

Enclosed please find the following:

An original and one (1) copy of the Articles of Organization Registered Agent Designation, and

A check for \$346.25 for filing fees.

Kindly process same in your normal course and forward this office a certified copy of the articles including the applicable certificate at your earliest convenience.

Very Truly Yours,

Gregory E. Melnick,

Department of State Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I. NAME:

The name of the Limited Liability Company is:

ACT AMERICA, L.C.

ARTICLE II. ADDRESS:

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

6715 Bittersweet Lane Orlando, Fl. 32819

ARTICLE III. DURATION

The period of duration for the Limited Liability Company shall be:

Perpetual

ARTICLE IV. MANAGEMENT

The Limited Liability Company is to be managed by the members and their names and addresses are:

Yoshimi Yano 5716 E. Windhover Dr. Orlando, Fl., 32819

Jun Yoshikawa 6715 Bittersweet La. Orlando, Fl. 32819

Kaori Obata 13905 Osprey Links Rd. Orlando, Fl. 32837

Naoki Ishikawa 6518 Grovsnor Ln. Orlando, Fl.

المناشقة بناء المسطر المنادا

Kazuyuki Ukon 2057 S. Kirkman Rd., #127 Orlando, Fl. 32811

ARTICLE V. ADMISSION OF ADDITIONAL MEMBERS

Members may admit additional members upon written approval by all members.

ARTICLE VI. MEMBERS RIGHTS TO CONTINUE BUSINESS

The remaining members of the limited liability company may continue the business on the death, retirement, remignation, expulsion, bankruptcy, or dissolution of a member or the accurrence of any other event which terminates the continued membership of a member in the limited liability company upon written approval of all members.

Jun Yoshitawa, Member

Date

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of ACT AMERICA, L.C. deposes and says:

1) the above named liability co	ompany has at least	two members	
2) the total amount of cash co	ntributed by the me	mber(s) is	\$15,000.00
3) if any, the agreed value of	property other than o	cash	
contributed by member(s) is			\$ <u> </u>
4) the amount of cash or prop by member(s) is	erty anticipated to b	e contributed	\$ <u> </u>
5) the total amount of 2, 3, and	d 4 is		\$15,000.00

Jun Yoshikawa, Member

Date

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: ACT AMERICA, L.C.
- 2. The name and address of the registered agent and office is:

Jun Yoshikawa 6715 Bittersweet Lane Orlando, Florida 32819

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.

Jun Yoshikasa Date Date Date PLORIDA