FOR FLORIDA LIMITED LIABILITY COMPANY 3: AN 9: 24

	SECRETĂR Y OF STATE TALL'AHASSEE, FLORIDA
Department of State Division of Corporations P. O. Box 6327	F PL 96 DEC 23 SECRETARY ALLAHASSE
Tallahassee, FL 32314	
RSCD Vee Group L.L	62 % [-]
SUBJECT: (Proposed limited liability of	company name - must include suffix)
	40002024004—-6 -12/10/96—01007001 ****346.25 *****346.25
Enclosed is an original and one (1) copy of the	e articles of organization and a check for :
Enclosed is an original and one (1) copy of a	
\$285.00 \$293.75 Filing Fee Filing Fee, & Registered Agent Agent designation Certificate	Filing Fee, Filing Fee, Registered Agent Registered Agent Designation & Designation, Certified Copy Certificate
	1 2/50
FROM: Roy A. Adams	(Printed or typed)
7907 NW 53rd St S	nite 145 (145)
Miami Fl 33166	Address (SV)
C	ity, State & Zip
305-590-4908	

Daytime Telephone number



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

December 12, 1996

ROY A. ADAMS 7907 NW 53RD ST, SUITE 145 MIAMI, FL 33166

SUBJECT: VEE GROUP L.L.C. Ref. Number: W96000026109

Chunges to/ RSCD Group L.L.C.

We have received your document for VEE GROUP L.L.C. and check(s) totaling \$346.25. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name DOES NOT constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6915.

Pamela Hall Document Specialist

Letter Number: 896A00055577

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

96 DEC 23 AM 9: 24

ARTICLE I - Name:

The name of the Limited Liability Company is:

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Wee Group L.L.C.

ARTICLE II - Address:

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

is:

7907 NW 53rd ST

Suite 146,

Miami FL 33166

ARTICLE III - Duration:

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

December 1, 1996

thru December 1, 2000

[AN 1, 1997

ARTICLE IV - Management: (check and complete the appropriate statement)

The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

33166 Roy A. Adams 7907 NW 53rd St , Suite 146 Miami Fl

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/ are:

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS 96 DEC 23 AM 9: 25

SECRETART OF STATE TALLAHASSEE, FLORIDA

The undersigned member or authorized representative of a member of	deposes and says:	
1) the above named limited liability company has at least two members		
2) the total amount of cash contributed by the member(s) is	\$ 6,500.00	
 if any, the agreed value of property other than cash contributed by member(s) is A description of the property is attached and made a part hereto. 	\$ <u>0</u>	
4) the amount of cash or property anticipated to be contributed by member(s) is 5) the total amount of 2, 3, and 4 is	\$ <u>0</u>	
Signature of a member or authorized representative of a member. (In accordance with section 608,408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)		

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OF \$100.000 at 100.000 at 100.0000 at 100.0000 at 100.0000 at 1

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

	the limited liability company is: Group L.L.C.	
2. The name an	d address of the registered agent and office is:	
	Roy A. Adams	
	(Name)	
	7907 NW 53rd St Suite 146	
	(P.O. Box or Mail Drop Box NOT ACCEPTABLE)	
	Miani Fl 33166	
	(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.

6/11/96 12/17/96

Filing Fee: \$ 35 for Designation of Registered Agent