

L99000004626

COVER LETTER
FOR FLORIDA LIMITED LIABILITY COMPANY

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Name of L.L.C. --- AMBER NATIVE, L.L.C.

Enclosed is an original and one (1) copy.

Filing fee for articles of organization of Florida Limited Liability Company:

\$ 250.00 Filing fee for Articles of Organization and Affidavit
\$ 35.00 Designation of Registered Agent

Enclosed is a check made payable to the Florida Department of State in the amount of \$ 285.00 for payment of the above.

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****285.00 ****285.00

FROM: Frank Tolin
Name (printed or typed)

7355 N.W. 41 Street
Address

Miami, Florida 33166
City, State & Zip

(305) 718-9831
Daytime Phone Number

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: Amber Native L.L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 7355 N.W. 41 Street, Miami, Florida 33166.

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be perpetual unless sooner dissolved by and in accordance with Florida law.

ARTICLE IV - Management:

(Check the appropriate box and complete the 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:

Frank Tolin

7355 N.W. 41 Street, Miami, Florida 33166

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

ARTICLE V - Admission of Additional Members:

The right of the members to admit additional members and the terms and conditions of the admissions shall be: by the unanimous consent of all the members in writing.

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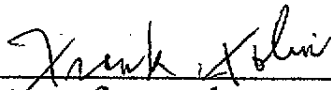
ARTICLE VI - Members Rights to Continue Business:

The remaining members of the limited liability company shall have the right to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company.

ARTICLE VII – Affidavit of Membership and Contributions

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

- 1) the above named limited liability company has at least one member;
- 2) the total amount of cash contributed by the member(s) is \$ 7,500;
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ None;
(A description if the property is attached and made a part hereto.)
- 4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is \$ 7,500.
(This total includes amounts from 2 and 3 above.)



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.)

Frank Tolin

Typed or printed name of signee

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**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 SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

The name of the limited liability company is: AMBER NATIVE, L.L.C.

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

Harvey Tolin

Name

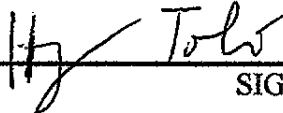
7355 N.W. 41 Street

Florida street address (P.O. Box NOT ACCEPTABLE)

Miami, Florida 33166

CITY, STATE AND 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.



SIGNATURE

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