

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : ACCOUNTING HEART LLC

Account Number : 120220000077 Phone : (954)673-6545 Fax Number : (954)827-3314

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FLORIDA LIMITED LIABILITY CO. CARL'S TWO LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: (Must end with the words *Limited Liability Company, *LLC, "or "LLC,")

CARL'S TWO LLC

ARTICLE II - Address;

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

1727 Victoria Pointe Circle (Weston Hills)

Weston, FL -33327

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 business entity with an active Florida registration.)

MILKO GRBIC 17121 COLLINS AVENUE UNTI 3404 SUNNY ISLES, FL. 33160

ARTICLE IV-

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

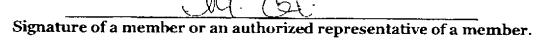
Title: MGR MILKO GRBIC 17121 COLLINS AVENUE UNIT 3404 SUNNY ISLES, FL. 33160 US

Title: MGR RONALD SANTOLAYA 3706 VISTA WAY, WESTON FL. 33331 US

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Required Signatures:



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 arc 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.817.355, F.S.

Milko Grbic

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.

Registered Agent's Signature (REQUIRED)