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ACCOUNT NO. : 072100000032

REFERENCE : 718976 89162A

AUTHORIZATION : Patricia Pujate

COST LIMIT : \$ 155.00

ORDER DATE : June 2, 2000

ORDER TIME : 9:34 AM

ORDER NO. : 718976-005

300003276053--7

CUSTOMER NO: 89162A

CUSTOMER: Maurice J. Baumgarten, Esq
ANANIA, BANDKLAYDER, BLACKWELL,
Nationsbank Tower, Suite 4300
100 Southeast Second Street
Miami, FL 33131

DOMESTIC FILING

NAME: MAGENA LLC

XX ARTICLES OF ORGANIZATION
 CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Cindy Harris - EXT. 1137
EXAMINER'S INITIALS:

FILED
00 JUN -5 AM 11:59
DEPARTMENT OF STATE
TALLAHASSEE FLORIDA
6/5

RECEIVED
00 JUN -5 AM 10:00
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MAGENA LLC

ARTICLE II - Address:

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

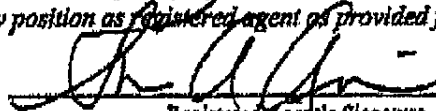
6303 Blue Lagoon Drive, Suite 380, Miami, Florida 33126

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Francis A. Anania, Esq.
Name
100 S.E. Second Street, Suite 4300
Florida street address (P.O. Box NOT acceptable)
Miami FL 33131-2144
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 as provided for in Chapter 608, F.S..



Registered Agent's Signature

Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is therefore, a manager - managed company.

FILED
 00 JUN -5 AM 11:59
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

(An additional article may be added if an effective date is requested)

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

(In accordance with section 608.108(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

MICHAEL A. GOLDBERG

Typed or printed name of signor

FILING FEES:

- \$ 100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (OPTIONAL)
- \$ 5.00 Certificate of Status (OPTIONAL)