

LO3 00000 1057

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

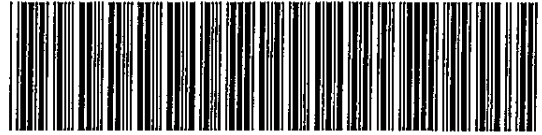
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/09/03--01071--003 **160.00

SEC. STATE OF FLORIDA
TALLAHASSEE, FLORIDA

03 JAN -9 11:09 AM

FILED

LO3-1057
Q

FILING SERVICE REQUESTED

January 8, 2003

TO THE ATTENTION OF:

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

Name of LLC:

CHAMBORD PCI, LC

Document to File:

Articles of Organization

Amount Due:

\$100.00	Filing Fee- Articles of Organization
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy Return
\$ 5.00	Certificate of Status
<u>\$160.00</u>	<u>Total Charge</u>

Payment Method:

Corporate Check Enclosed

Return Recorded copy to:

J. Hutchins Haese
Vice President/CFO
Porten Homes
5515 Security Lane, Suite 550
Rockville, MD 20852

Contact Person:

J. Hutchins Haese
301-998-3311
301-881-2191 FAX

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 JAN -9 AM 9:03

FILED

**ARTICLES OR ORGANIZATION
OF
CHAMBORD PCI, LC**

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I Name: The name of the Limited Liability Company shall be:

“CHAMBORD PCI, LC”

ARTICLE II Address: The mailing and street address of the principal office of the Limited Liability company is:

Chambord PCI, LC
c/o Porten Companies, Inc.
666 S. Military Trail
Deerfield Beach, FL 33442

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

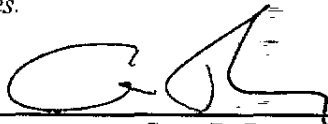
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ARTICLE III The Registered Agent, Registered Office, and Registered Agent's Signature:

Scott B. Porten
666 S. Military Trail
Deerfield Beach, FL 33442

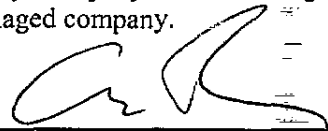
Having been named as registered agent, and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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, Florida Statutes.



Scott B. Porten
Registered Agent's Signature

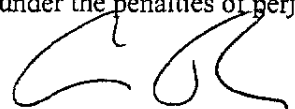
ARTICLE IV MANAGEMENT: (Check Box if applicable)

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



Scott B. Porten (SEAL)
Signature of a Member or an authorized representative of a member

(In accordance with Section 608.408 (3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)



Scott B. Porten