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\ ACCESS, \	236 East 6th Av	enue . Tallahassee, Florida 32303	
INC. P.	O. Box 37066 (32315-7066)	~ (850) 222-2666 or (800) 969-1666 .	Fax (850) 222-1666
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ARTICLES OF ORGANIZATION

OF

ONE EMERALD PLACE, L.L.C.

THE UNDERSIGNED, pursuant to the provisions of Chapter 608 of the Florida Statutes for the purpose of forming a Limited Liability Company under the laws of the State of Florida, do hereby set forth the following:

1. NAME

The name of the Limited Liability Company is:

ONE EMERALD PLACE, L.L.C.

2. MAILING ADDRESS AND STREET ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is 3107 Stirling Road, Suite 204, Ft. Lauderdale, Florida 33312.

3. **REGISTERED AGENT**

The name and address of the initial Registered Agent in Florida for the Limited Liability Company is **STEVEN B. BERMAN**, 3107 Stirling Road, Suite 204 Ft. Lauderdale, Florida 33312.

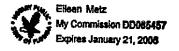
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4. MANAGEMENT

The Limited Liability Company is to be managed by one (1) manager and the names and addresses of the manage is **STEVEN B. BERMAN**, 3107 Stirling Road, Suite 204, Ft. Lauderdale, Florida 33312.

Executed this 12 ^{11/2} day of FEBRUARY . 2003.			
STËVEN B. BERMAN	_(SEAL	_)	
STATE OF FLORIDA) SS COUNTY OF BROWNS)	SECRETARY OF STATE	03 FEB 18 PM 1:19	
The foregoing instrument was acknowledged before me this	a who	of I e Is	

NOTARY PUBLIC, State of Florida



ACCEPTANCE BY REGISTERED AGENT

L.L.C., the undersigned accepts such appointment and agrees to act in such capacity and accepts the obligations contained in Section 608.415 of the Florida Statutes.

EXECUTED this ______ day of _____ FEBRUARY _____, 2003.

STEVEN B. BERMAN Registered Agent