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Division of Corporations

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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : ROBERT N. ALLEN, JR., P.A.
Account Number : 073324000622
Phone : (305) 372-3300
Fax Number : (305) 379-7018

DIVISION OF CORPORATION

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RECEIVED

LIMITED LIABILITY COMPANY

GSM Properties, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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3-5-03

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**ARTICLES OF ORGANIZATION
OF
GSM Properties, LLC**

The undersigned person(s) has/have declared the intention of forming a Limited Liability Company pursuant to Chapter 608 of the Florida Limited Liability Company Act and, in accordance with such statutes, the person(s) provides the following information:

**ARTICLE I
NAME**

The name of the Limited Liability Company is: GSM Properties, LLC.

**ARTICLE II
ADDRESS**

The mailing address of the principal office of the Limited Liability Company is c/o Allen & Galego, 601 Brickell Key Drive, Suite 805, Miami, Florida 33131. The street address of the principal office of the Limited Liability Company is c/o Allen & Galego, 601 Brickell Key Drive, Suite 805, Miami, Florida 33131.

**ARTICLE III
REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S
SIGNATURE**

The name and street address of its initial registered agent are Allen & Galego, 601 Brickell Key Drive, Suite 805, Miami, Florida 33131.

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.

Dated as of the 4th day of March, 2003.

Allen & Galego, by:

Robert N. Allen, Jr.
Robert N. Allen, Jr., President

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STATE
OF
FLORIDA
SECRETARY OF STATE

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**ARTICLE IV
MANAGEMENT**

The Company is to be managed by one manager and is, therefore, a manager-managed company.

Robert N. Allen, Jr.
Signature of 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.)

Typed name of authorized representative of Member (Tropicale, Inc. is the Member authorizing the execution of this document) who is signing these Articles: Robert N. Allen, Jr.

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AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Preparer:

Robert N. Allen, Jr.

Allen & Galego**(see fictitious name filing for registered agent)

Attorneys at Law

601 Brickell Key Drive, Suite 805

Miami, Florida 33131

Ph. (305) 372-3300

FL BAR No. 0329576

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