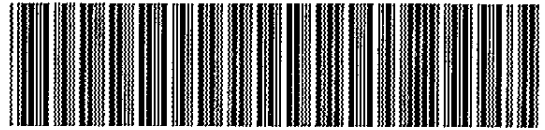


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STATE
TALLAHASSEE, FLORIDA



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(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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LAW OFFICES

FORD & HARRISON^{LLP}

A LIMITED LIABILITY PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS AND INDIVIDUALS

100 S.E. 2nd Street, Suite 4500, Miami, Florida 33131
Tel (305) 808-2100 Fax (305) 808-2101
www.fordharrison.com

November 14, 2003

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STATE
TALLAHASSEE, FLORIDA

VIA FEDERAL EXPRESS

Registration Section
Division of Corporation
409 East Gains Street
Tallahassee, FL 32399

RE: Registration of Corporation

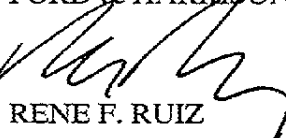
To Whom It May Concern:

Kindly find enclosed Articles of Organization for Florida Limited Liability Company for IPS LLC. Please register and forward the Letter of Acknowledgment upon completion.

Thank you for your assistance.

Sincerely,

FORD & HARRISON LLP



RENE F. RUIZ

RR/dpg
Enclosures
Miami:58625.1

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TRANSMITTAL LETTER

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03 NOV 17 PM 5:18
STATE
TALLAHASSEE, FLORIDA

TO: Registration Section
Division of Corporations

SUBJECT:

IPS LLC

(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SIDNEY B RABIN

(Name of Person)

(Firm/Company)

87051 NE 214 TERRACE

(Address)

NORTH MIAMI BEACH, FL 33179

(City/State and Zip Code)

For further information concerning this matter, please call:

SIDNEY B. RABIN

(Name of Person)

at (305) 788-7595

(Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 B. Gaines Street
Tallahassee, Florida 32399

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

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STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

IRPS LLC

ARTICLE II - Address:

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

Principal Office Address:

2051 NE 214 TERRACE
NORTH MIAMI BEACH, FL
33179

Mailing Address:

2051 NE 214 TERRACE
NORTH MIAMI BEACH, FL
33179

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

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

SIDNEY B. RABIN
Name

2051 N.E. 214 TERRACE
Florida street address (P.O. Box NOT acceptable)

NORTH MIAMI BEACH FLORIDA 33179
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, Florida Statutes..

Sidney B. Rabin
Registered Agent's Signature

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STATE
TALLAHASSEE, FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

SIDNEY B RABIN
2051 NE 214 TERRACE
NORTH MIAMI BEACH, FL 33179

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:


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.)

SIDNEY B. RABIN
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)