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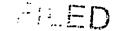
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INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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1.1.	WATER, FL

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must cont	ain the words "Limited L	iability Company	/, "L.L.C.," or "LLC.")
RTICLE II - Address:			
he mailing address and street ac	ddress of the principal of	fice of the Limite	d Liability Company is:
<u>Princip</u>	al Office Address:		Mailing Address:
1805 Ponce de Leon	Blvd., Ste 100	180	15 Ponce de Leon Blvd, Ste 100
Coral Gables, FL 331	134	Cor	ral Gables, FL 33134
he Limited Liability Company other business entity with an a	cannot serve as its own F active Florida registration	Registered Agent.	ent's Signature: You must designate an individual
The Limited Liability Company nother business entity with an a	cannot serve as its own F active Florida registration address of the registered a	Registered Agent.	
The Limited Liability Company nother business entity with an a	cannot serve as its own Factive Florida registration address of the registered a Joseline Pereira	Registered Agent. agent are:	
RTICLE III - Registered Age The Limited Liability Company nother business entity with an a the name and the Florida street a	cannot serve as its own Factive Florida registration address of the registered a Joseline Pereira	Registered Agent.	
The Limited Liability Company nother business entity with an a	cannot serve as its own Factive Florida registration address of the registered a Joseline Pereira	Registered Agent, agent are:	
The Limited Liability Company nother business entity with an a	cannot serve as its own Factive Florida registration address of the registered a Joseline Pereira	Registered Agent, agent are: Name	You must designate an individual
The Limited Liability Company nother business entity with an a	cannot serve as its own Factive Florida registration address of the registered a Joseline Pereira	Registered Agent, agent are: Name	You must designate an individual

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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Filing Fees:

\$125,00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

The name and address of each person authorized to manage and control the Limited Liability Company:

ARTICLE IV-