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CORPORATION NAME(S) AND DOCUMENT NUMBER(S) (if known):

Ortelachen Development LLC

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	Limited Liability	Change of Registered Agent	
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5 pages
Ordered By:

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Date:

**ARTICLES OF ORGANIZATION
OF
INTERLACHEN DEVELOPMENT , L.L.C.**

The undersigned organizers hereby form a Limited Liability Company under Chapter 608 of the laws of the State of Florida.

ARTICLE I. NAME

The name of the Limited Liability Company shall be:
Interlachen Development, L.L.C.

ARTICLE II. PRINCIPAL PLACE OF BUSINESS

The address of the principal place of business of this company shall be 218 North Jefferson, Suite 400, Chicago, Illinois, 60661, and the mailing address of the company shall be the same.

ARTICLE III. TERM OF EXISTENCE

This limited liability company shall commence its existence on the date these Articles are filed, pursuant to Florida Statutes Section 608.409; and shall have perpetual existence or until dissolved in a manner provided by law or as provided in the regulations adopted by the members.

ARTICLE IV. NATURE OF BUSINESS

This limited liability company may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

ARTICLE V. CONTRIBUTIONS TO CAPITAL

This company shall commence its existence with **ONE THOUSAND AND NO/100 DOLLARS (\$1000.00)** cash as its contributed capital. There are no additional contributions to be made by the members except as determined by unanimous consent of the members.

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ARTICLE VI. NEW MEMBERS

No new members shall be admitted without the consent of all existing members.

ARTICLE VII. CONTINUATION OF COMPANY

Remaining members of this limited liability company shall have the right to continue the business of the company upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member, or the occurrence of any event that terminates the continual membership of a member in the limited liability company, upon the unanimous vote of all remaining members.

ARTICLE VIII. MANAGEMENT

1. The limited liability company shall be managed by a manager or managers pursuant to Florida Statutes Section 608.422. The name and address of the manager who is to serve until the first annual meeting of the members or until his successor(s) is elected and qualified is:

Yvonne Jones
218 North Jefferson
Chicago, Illinois 60661

2. At the first annual meeting of the members and annually thereafter the manager or managers shall be elected annually by the members in the manner prescribed by and provided in the regulations of this limited liability company.

ARTICLE IX. INITIAL REGISTERED OFFICE AND REGISTERED AGENT

1. The name of the initial registered agent of the company is Kathleen C. Passidomo, Esq.

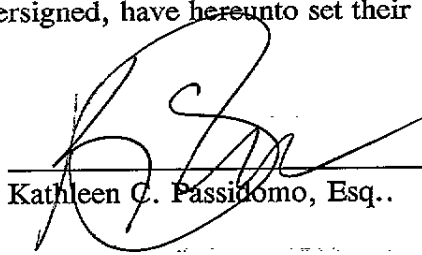
2. The street address of the initial registered office of the limited liability company shall be Kelly, Price, Passidomo & Siket, 2640 Golden Gate Parkway, Suite 315, Naples, FL 34105. The mailing address shall be Kelly, Price, Passidomo & Siket, 2640 Golden Gate Parkway, Suite 315, Naples, FL 34105.

ARTICLE X. ORGANIZERS

1. The name and street address of the Organizer to these Articles of Organization is:

Kathleen C. Passidomo, Esq.
Kelly, Price, Passidomo, Siket & Solis
2640 Golden Gate Parkway
Suite 315
Naples, Florida 34105

IN WITNESS WHEREOF, the undersigned, have hereunto set their hands, on this 27 day of April, 1999.


Kathleen C. Passidomo, Esq..

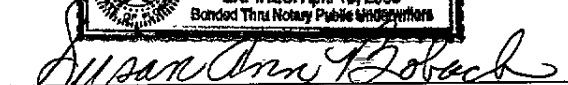
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA)
) ss
COUNTY OF COLLIER)

Before me, a notary public authorized to take acknowledgments in the State and County set forth above personally appeared Kathleen C. Passidomo, who was not sworn and who is personally known to me as the person who executed these Articles of Organization, and he acknowledged before me that as his free act they executed these Articles of Organization.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the State and County aforesaid, this 27 day of April, 1999.



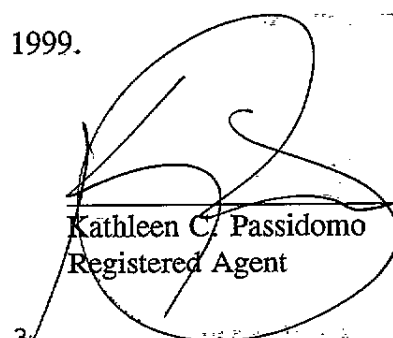

Notary Public

My Commission Expires: _____

ACCEPTANCE:

I agree, as Registered Agent, to accept service of process and act in this capacity; to comply with the provisions of all statutes relating to the proper and complete performance of my duties; to keep my office open during prescribed hours; to post my name (and any other officers of said limited liability company authorized to accept service of process at the above Florida designated address) in some conspicuous place in my office as required by law. I am familiar with and accept the obligations of my position as registered agent.

WITNESS my hand this 27 of April, 1999.


Kathleen C. Passidomo
Registered Agent

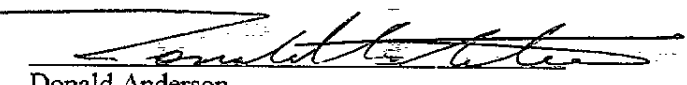
AFFIDAVIT PURSUANT TO 608.407(2), FLORIDA STATUTES

The undersigned constituting one of the four (4) members of Interlachen Development, L.L.C., a Florida Limited Liability Company, certifies:

1. The limited liability company has three (4) members.
2. The amount of capital contributions to date of the members is \$1000.00 cash and 200 dollars of property other than cash.
3. The initial total amount of cash and the value other property anticipated to be contributed by the members is \$4,000.00 dollars.

FURTHER AFFIANTS SAYETH NOT.

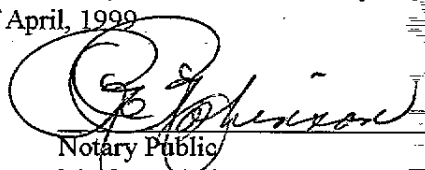
Under the penalties of perjury, I declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.


Donald Anderson

STATE OF FLORIDA)
)
COUNTY OF COLLIER) ss:

Before me, a notary public authorized to take acknowledgements in the State and County set forth above personally appeared Donald Anderson who was sworn and who is personally known to me as the person who executed this Affidavit or who produced _____ as identification, and he acknowledged before me that as his free act he executed this Affidavit and stated that the facts contained therein are true.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the State and County aforesaid, this 27th day of April, 1999


Notary Public
My Commission Expires:

FF:\DATA\WPDATA\KATHLEEN\CORPCLNT\Interlachen\ART

