

**THOMAS G. SHERMAN, ESQ., P.A.**

218 ALMERIA AVENUE  
CORAL GABLES, FLORIDA 33134  
305-448-5898  
FAX: 305-445-4458

L0100000 2423

February 9, 2001

Florida Department of State  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

000003675620--3  
-02/12/01--01160--022  
\*\*\*160.00 \*\*\*160.00

Re: Richards Properties, L.L.C.

EFFECTIVE DATE  
2-9-01

Dear Sir or Madam:

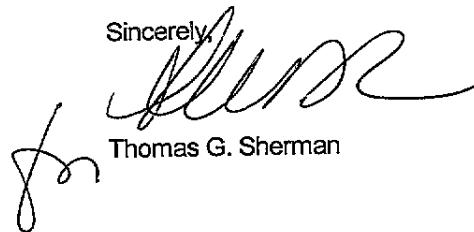
Enclosed herewith please find the Articles of Organization for the above mentioned Florida Limited Liability Company together with my check in the amount of \$160.00, representing the following:

- |                                     |          |
|-------------------------------------|----------|
| 1. Filing fee:                      | \$100.00 |
| 2. Designation of Registered Agent: | 25.00    |
| 3. Certified Copy                   | 30.00    |
| 4. Certificate of Status            | 5.00     |

Please forward confirmation to my office via fax as soon as this Limited Liability Company is registered.

Thank you for your anticipated cooperation in this matter.

Sincerely,

  
Thomas G. Sherman

FILED  
01 FEB 12 PM 1:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I- NAME:**

The name of the Limited Liability Company is **RICHARD PROPERTIES, L.L.C.**

**ARTICLE II- ADDRESS:**

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

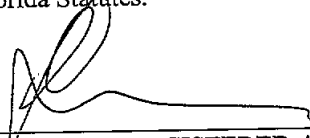
10 Christopher Street, New York, New York, 10014

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

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

Thomas G. Sherman  
218 Almeria Avenue  
Coral Gables, Florida 33134

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.

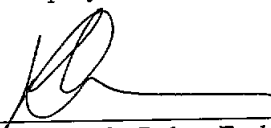
  
\_\_\_\_\_  
THOMAS G. SHERMAN, REGISTERED AGENT

**ARTICLE IV- MANAGEMENT:**

The Limited Liability Company is to be managed by one manager or more managers, and is therefore, a manager-managed company.

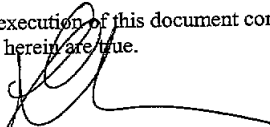
**ARTICLE V- EFFECTIVE DATE:**

The Effective Date of this Limited Liability Company is February 9, 2001.

  
\_\_\_\_\_  
Thomas G. Sherman, Attorney for Robert Eychner, Manager

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
01 FEB 12 PM 1:54  
FILED

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.

  
\_\_\_\_\_  
Thomas G. Sherman, Authorized Representative