AV FILM OF KAREN SAIGLER, IAC 99 NV 707 AVENUE, #105 PLANN-ATION, 12 3331 Telephone: (954) 585-6050 Fax: (954) 585-6070

Èmail: kspigler@justice.com

July 19, 2001

100004491851----07/23/01--01094--012 ****125.00 ****125.00

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Dreams of Paradise, LLC

To Whom It May Concern:

LOI - 12231

Enclosed, please find the Articles of Organization for a Florida Limited Liability Company along with a check in the amount of \$125.00 for the filing fee (\$100.00) and the Designation of Registered Agent (\$25.00).

Thank you for your attention to this matter.

Regards,

Karen J. Spigler

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SECRETARISE FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I-Name:

The name of the Limited Liability Company is: DREAMS OF PARADISE, LLC

ARTICLE II-Address:

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

c/o ROLAND BLOSSER 960 JEFFREY STREET BOCA RATON, FL 33487

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

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

KAREN J. SPIGLER

Name

499 NW 70TH AVENUE, #105

Florida street address (P.O. Box NOT acceptable)

PLANTATION, FL 33317

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, F.S..

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

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

(An additional article must be added if an effective date is requested)

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.)

KAREN J. SPIGLER
Typed or printed name of signee

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)