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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

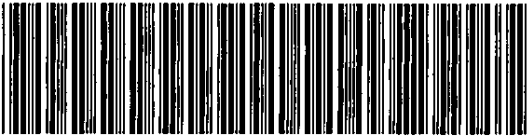
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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LAW OFFICES

POE & FREIREICH

A PROFESSIONAL CORPORATION

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May 15, 2006

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ARIZONA OFFICE

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HARVEY R. POE *
(LLM IN TAXATION)

JAY J. FREIREICH **
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(LLM IN TAXATION)

HELEN H. SON ◊
(LLM IN TAXATION)

PETER VOUTSINAS □
(LLM IN TAXATION, MBA)

AERICKA J. HEAVENS □

* NJ, NY & AZ BARS

** NJ, PA & FL BARS

◊ NJ, NY & DC BARS

◊ NJ & NY BARS

□ NJ & PA BARS

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

Re: 262 Fortuna Drive, LLC

Dear Sir or Madam:

Enclosed for filing please find an original and one (1) copy of the Articles of Organization for the above named limited liability company. In payment of your filing fee, enclosed please find our check number 6081 made payable to the Florida Department of State in the amount of ONE HUNDRED TWENTY-FIVE (\$125.00) DOLLARS. Please mark the copy as "filed" and return same to his office in the postage-prepaid envelope enclosed for your convenience.

Should you have any questions, please do not hesitate to contact the undersigned.

Very truly yours,


PETER VOUTSINAS

PV:ck

Encls.

cc: Mrs. Susan Marra (w/ Encls.)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

262 Fortuna Drive, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

548 Ridgedale Avenue

548 Ridgedale Avenue

East Hanover, New Jersey 07936

East Hanover, New Jersey 07936

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Mr. Joseph Giordano

Name

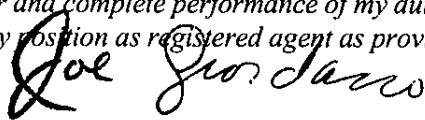
8943 SE Hawks Nest Court

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

Hobe Sound, FL 33455-8940

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 (REQUIRED)

(CONTINUED)

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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:

MGRM

SAAAG REALTY, LLC

548 Ridgedale Avenue

East Hanover, NJ 07936

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

SAAAG Realty, LLC, by Mrs. Susan Marra

Typed or printed name of signee

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)**

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