L000000011327

ACCOUNT NO. : 072100000032

REFERENCE : 832100   126224A

AUTHORIZATION : *Patricia Pryut*

COST LIMIT : $ ~~70.00~~ 125.00

ORDER DATE : September 15, 2000

ORDER TIME : 10:54 AM

ORDER NO. : 832100-005

CUSTOMER NO: 126224A   5000003398385--4

CUSTOMER: Allan M. Glaser, Esq
          Allan M. Glaser, P.a.

          Suite 807
          11900 Biscayne Boulevard
          Miami, FL 33181

DOMESTIC FILING

NAME: PTI TECHNOLOGIES, LLC

EFFECTIVE DATE:

XX___ ARTICLES OF INCORPORATION
_____ CERTIFICATE OF LIMITED PARTNERSHIP
 ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX_____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sandra Mathis - EXT. 1165
                        EXAMINER'S INITIALS:

00 SEP 19 PM 3: 55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
APPROVED AND FILED

DIVISION OF CORPORATION
00 SEP 19 PM 2: 28
RECEIVED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I. NAME

The name of the Limited Liability Company is:

PTI TECHNOLOGIES, LLC

ARTICLE II. ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is: 11900 Biscayne Boulevard, Miami, Florida 33181.

ARTICLE III. DURATION

The period of duration for the Limited Liability Company shall be: Perpetual

ARTICLE IV. REGISTERED AGENT

The street address of the initial registered office of the corporation shall be Suite 807, 11900 Biscayne Boulevard, Miami, Florida 33181, and the name of the initial registered agent of the corporation at that address is Allan Glaser.

ARTICLE V. MANAGEMENT

The Limited Liability Company is to be managed by the members and the names and addresses of the managing members are: —

Irene Pel
Mem.   11900 Biscayne Boulevard
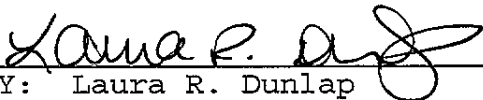   Miami, Florida 33181

Nicholas Kho
Mem.   11900 Biscayne Boulevard
              Miami, Florida 33181

Barbara Lam
Mgr.   11900 Biscayne Boulevard
              Miami, Florida 33181

The undersigned authorized representative of a member of PTI TECHNOLOGIES, LLC hereby executes these articles of organization on this 19th day of September, 2000.

CORPORATION SERVICE COMPANY

BY: Laura R. Dunlap
as authorized
representative of
PTI Technologies, Inc.

CHS/scm

ACCEPTANCE OF REGISTERED AGENT

DESIGNATED IN THE ARTICLES OF ORGANIZATION

Allan Glaser   , an individual residing in this state, having a business office identical with the registered office of the corporation named below, and having been designated as the Registered Agent in the above and foregoing Articles of Organization of:

PTI TECHNOLOGIES, LLC

is familiar with and accepts the obligations of the position of Registered Agent under Section 608 Florida Statutes.

By: _Alla Glave_____

Typed Name: *Allan Glaser*

LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of PTI TECHNOLOGIES, LLC (the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

This Limited Power of Attorney is executed on this _15_ day of _September_ 20 0 0.

_____
Allan M Glaser
on attorney

Signature

Print Name of Signer

WITNESS:

_____
Signature

FARIDA MORRIS
Print Name of Witness

WITNESS:

_____
Signature

ELIZABETH RODRIGUEZ
Print Name of Witness