

L-010000008662

L.L.M. Management, Inc.

P. O. Box 222  
Fort Lauderdale, Florida 33305-2242  
Tel: (954) 462-8370 Fax: upon request  
E-mail: [mohnani@mohnani-group.com](mailto:mohnani@mohnani-group.com)  
[www.mohnani-group.com](http://www.mohnani-group.com)

May 23, 2001

Registration Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

100004326791--2  
-05/29/01--01166--009  
\*\*\*125.00 \*\*\*125.00

Re: Code Busters, L.L.C.

Registration Section: L01-8662

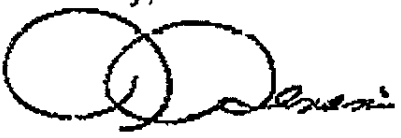
Enclosed are the following items in connection with the formation of the above-captioned Limited Liability Company pursuant to Chapter 608, Florida Statutes:

- Articles of Organization
- Check in the amount of \$125.00

Please return the letter of acknowledgement to L.L.M. Management, Inc. at the address listed in the letterhead.

Thank you.

Sincerely,



Lakhi Mohnani

4/25/31  
FILED  
01 MAY 29 AM 9:48  
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: CodeBusters, L.L.C.

**ARTICLE II - Address:**

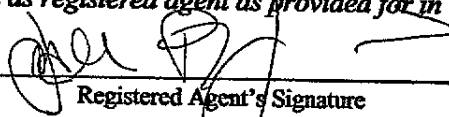
The mailing address and street address of the principal office of the Limited Liability Company is:  
1967 Marietta Drive, Fort Lauderdale, Florida 33316

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

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

Jack Braunstein  
Name  
1967 Marietta Drive  
Florida street address (P.O. Box NOT acceptable)  
Fort Lauderdale, Florida 33316  
City, State, and Zip

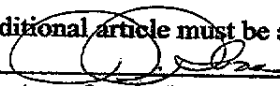
*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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.)

Lakhi L. Mohnani  
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)

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FILED  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA