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WINTER SPRINGS, FLORIDA 32708 PHONE (407)327-9988 FAX (407)327-0092

May 31, 2001

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

400004339684--1 -06/04/01--01068--022 \*\*\*\*\*130.00 \*\*\*\*\*130.00

RE: LLC Filing

Dear Representative:

Enclosed please find original Articles Of Organization for Florida Limited Liability Company for Robyan Enterprises, LLC.

I have enclosed check no. 1451 for \$130.00, to cover the following filing fees: \$100.00 for Articles of Organization, \$25.00 for Designation of Registered Agent and \$5.00 for Certificate of Status.

Thank you for your assistance with these matters.

Sincerely,

ROBYN S. ŠCHULMAN

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is:  |
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| Robyan Enterprises, LLC  |
| ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: 362 Twelve Oaks Drive Winter Springs, Florida 32708  |
| ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:   |
| The name and the Florida street address of the registered agent are:   |
| Robyn S. Schulman  Name  362 Twelve Oaks Drive   |
| Florida street address (P.O. Box <u>NOT</u> acceptable) <u>Winter Springs</u> , FL 32708  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.)   |
| Robyn S. Schulman  |
| 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)