

Division of Corporations

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Florida Department of State
Division of Corporations
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Katherine Harris, Secretary of State

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To: Division of Corporations
Fax Number : (850) 205-0383

From: Account Name : WARD, DAMON & POSNER, P.A.
Account Number : 072262000447
Phone : (561) 842-3000
Fax Number : (561) 842-3626

AL

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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LIMITED LIABILITY COMPANY

JAB OF PALM BEACH, LLC

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Estimated Charge	\$160.00

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ARTICLES OF ORGANIZATION OF

JAB OF PALM BEACH, LLC

THE UNDERSIGNED MEMBER, pursuant to the Florida Limited Liability Company Act, adopts the following Articles of Organization for such Limited Liability Company:

ARTICLE I - NAME

The name of this Limited Liability Company is: JAB OF PALM BEACH, LLC.

ARTICLE II - DURATION

The duration of this Limited Liability Company is perpetual.

ARTICLE III - PURPOSE

The purpose for which this Limited Liability Company is organized is to engage in any lawful act or activities for which limited liability companies may be organized under the laws of the State of Florida.

ARTICLE IV - MAILING ADDRESS OF LIMITED LIABILITY COMPANY

The mailing address of the business of this Limited Liability Company is 841 Donald Ross Road, Juno Beach, Florida 33408 and the principal place of business of this Limited Liability Company is 841 Donald Ross Road, Juno Beach, Florida 33408.

ARTICLE V - INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The street address of this Limited Liability Company's initial registered office in Florida is 4420 Beacon Circle, Suite 100, West Palm Beach, Florida 33407 and the name of its initial registered agent at that address is Michael J Posner, Esq.

Prepared by: Michael J Posner, Esq.
4420 Beacon Circle, Suite 100
West Palm Beach, Florida 33407
Bar No: 525685 Phone: 561/842-3000

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ARTICLE VI - MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is therefore a manager - managed limited liability company. The names and addresses of the initial managers are as follows:

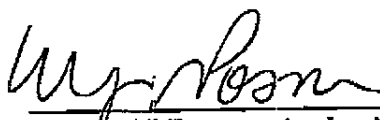
Alexander Aranyos, Jr.

3119 Casseekey Island Road, Jupiter, Florida 33477

Joseph Los

13252 78th Place, West Palm Beach, Florida 33412

DATED this 25th day of June, 2001.



Michael J Posner, Authorized Representative
(In accordance with Florida Statutes Section 608.408(3) the execution of this document constitutes and affirmation under penalties of perjury that the facts stated herein are true.)

STATE OF FLORIDA)
COUNTY OF PALM BEACH)

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared Michael J Posner, Authorized Representative, to me known to be the person described in and who executed the foregoing instrument and acknowledged before me that he executed the same for the purposes therein expressed.

WITNESS my hand and official seal in the County and State last aforesaid this 25th day of June, 2001.

Notary Public
My Commission Expires:

Sign: _____

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**CERTIFICATE DESIGNATING PLACE OF
BUSINESS OR DOMICILE FOR THE SERVICE
OF PROCESS WITHIN THIS STATE NAMING
AGENT UPON WHOM PROCESS MAY BE SERVED**

ACKNOWLEDGMENT:

Having been named as registered agent and to accept service of process for JAB OF PALM BEACH, LLC, at the initial registered office of the Limited Liability Company in this State designated in its Articles of Organization, 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, Florida Statutes.

Date: June 25, 2001


Michael J Posner

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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