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2909 WEST S.R. 434 SUITE 131 LONGWOOD, FL 32779

August 29, 2001

TELEPHONE: (407)786-4244 TELEFAX: (407)786-2993

Florida Secretary of State Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Re: Property Asset Management, LLC

200004564752---4 -08/30/01--01081--012 -----\*\*\*\*125.00 \*\*\*\*125.00

Dear Sir/Madam:

Enclosed please find one (1) original and one (1) photocopy of the Articles of Organization for Property Asset Management, LLC together with a check in the amount of \$125.00 as payment for the filing fee and registered agent designation fee.

Please return the photocopy stamped with the filing information to the undersigned enclosed self-addressed stamped envelope provided for your convenience.

Thank you for your attention to this matter. If you have any questions or need mything further, please feel free to contact me at (407) 786-4244.

Very truly yours,

Harold E. Scherr

HES/cmn

enclosures

#### ARTICLES OF ORGANIZATION FOR PROPERTY ASSET MANAGEMENT, LLC

# FILED OI AUG 30 PM 5: 00 SECRETARY OF STATE TAIL AHASSEE, FLORIDA

#### ARTICLE I - NAME

The name of the Limited Liability Company is: Property Asset Management, LLC.

#### ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is: 5055 South U.S. Highway 17-92, Casselberry, Florida 32707

#### ARTICLE III - DURATION

The period of duration for the Limited Liability Company shall be: Fifty (50) years from date of filing of these Articles.

#### ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Steven D. Ira	5055 South Highway 17-92, Casselberry, Florida 32707
Stephanie Ira	5055 South Highway 17-92, Casselberry, Florida 32707
Bradley Vida	5055 South Highway 17-92, Casselberry, Florida 32707

#### ARTICLE V - ADMISSION OF ADDITIONAL MEMBERS

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be: Additional members shall be admitted only upon the unanimous consent and agreement of all remaining members.

#### ARTICLE VI – MEMBERS RIGHTS TO CONTINUE BUSINESS

The right, if given, of the remaining members of the Limited Liability Company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company shall be: The

remaining members shall have the right to continue the business of the corporation under said circumstances only upon the unanimous consent and agreement of all remaining members.

IN WITNESS WHEREOF, the undersigned being a member hereinbefore named, for the purpose of forming a Limited Liability Company under and pursuant to the laws of the State of Florida to do business both within and without the State of Florida, hereby makes and files these Articles of Organization declaring and certifying that the facts stated herein are true, and hereby subscribe thereunto and hereunto sets his hand and seal this 24th day of 4050T, 2001.

Steven D. Ira

STATE OF FLORIDA COUNTY OF SEMINOLE

The foregoing instrument was acknowledged before me this 24th day of UGUST, 2001, by Steven D. Ira, as Organizer of Property Asset Management, LLC. On behalf of said Limited Liability Company. He is personally known to me and did not take an oath.

Harold E Scherr
My Commission DD026829
Expires June 01 2005

Notary Public, Ștate of Florida

Print Name: HAROLD E. SCHERR

Commission #:

My Commission Expires:\_

OI AUG 30 PM ½°, ¥0 SECREJARY OF STATE

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.14 AND/OR SECTION 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILTY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT IN THE STATE OF FLORIDA.

- 1. The name of the Limited Liability Company is: Property Asset Management, LLC.
- 2. The name and address of the registered agent and office is: Patrick M. Burns, 1516 E. Hillcrest, Suite 307, Orlando, FL 32803.

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.

Potrick M Rurns

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