

Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number

: (850)205-0383

From;

Account Name : AGENTS AND CORPORATIONS, INC

Account Number : 120010000112 Phone : (302)575-0875

Fax Number : (302)575-1642 EL.

wol-28791

LIMITED LIABILITY COMPANY

Development Group L.L.C.

Certificate of Status Certified Copy A Page Count 01 Estimated Charge \$125.00

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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 17, 2001

AGENTS AND CORPORATION, INC.

SUBJECT: DEVELOPMENT GROUP, L.L.C.

REF: W01000028791

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: Development Group L.L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: P.O. Box 924116, Miami, FL 33092-4116

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

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

Agents and Corporations, Inc. Suite E, 773 4th Avenue North Naples, FL 34102

Having been named as registered agent and to accept services 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 satisfie must be added if an effective date is requested)

ir or an authorized representative of a member.

(in secondarion with service 608.408(3), Placeds Statutes, the exacution of this document constitutes at affirmation under the possibles of payary

first the lacks stated herein are true.)

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