DDDDDDDD580 ACCOUNT NO. : 07210000032

REFERENCE : 4<u>25</u>236

425236 7326902

AUTHORIZATION :

Tatricia 14

COST LIMIT :

\$ 125.00

ORDER DATE: March 3, 2002

ORDER TIME : 1:38 PM

ORDER NO. : 425236-001

CUSTOMER NO: 7326902

CUSTOMER: Mr. Robert S. Delaney Mr. Robert S. Delaney

25821 Pebblecreek Dr.

Bonita Springs, FL 34135

DOMESTIC FILING

NAME:

ABP HOSPITALITY MANAGEMENT,

LLC

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Norma Hull - EXT. 1115

EXAMINER'S INITIALS:

PERMITARO TO THEM INA 140. AUROJA OF COROSTAL AUROJA JESSAHALJAT

OZ MAR 12 PM 4: 32

BECEINED

02 HAR 12 AM 9: 28 SECRETARY OF STATE TALL AHASSEE, FLORIC

700005098427

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
ABP HOSPITALITY MANAGEMENT, LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: 25821 PEBBLECREEK DRIVE, BONITA SPRINGS, FL 34135
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Corporation Service Company Name
Florida street address (P.O. Box NOT acceptable)
m 38 a
Tallahassee FL 32301 City, State, and Zip
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. Corporation Service Company By: Delicion D. Skipper Registered Agent's Signature Registered Agent's Signature Asst. V. Pres.
Article IV - Management (Check box if applicable.) The Limited Liability Company is to be managed by one manager or more managers and therefore, a manager - managed company.
(An additional article must be added if an effective date is requested)
Neborah N. Skipper
Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), Florida Statutes, the execution
(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.)
DEBORAH D. SKIPPER
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)

MANAGING MEMBERS OF:

ABP HOSPITALITY MANAGEMENT, LLC

Robert S. Delaney Managing Member	25821 Pebblecreek Drive Bonita Springs, FL 34135
Alexander Passacantando Managing Member	3260 Bermuda Isle Circle, #716 Naples, FL 34109
Peter Priesner Managing Member	187 N. Lakeshore Drive Hypuloxl, FL 33462

02 MAR 12 AM 9: 28 SECRETARY OF STATE

LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of ABP HOSPITALITY MANAGEMENT, LLC (the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

This Limited Power of Attorney is executed on this 1241 day of March, 2002.

Signatur

Print Name of Signer

WITNESS:

Signature

AUGUANDETZ PASSACANTAN DO

Print Name of Witness

WITNESS:

Sinter

Signature

rint Name of Witness

SECRE IARY OF STATE FALLAHASSEF, FLORIO