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OF COUNSEL

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June 24, 2002

VIA CERTIFIED MAIL - RETURN RECEIPT REQUESTED

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: Umbrella Holdings, L.L.C.

Formation of Florida Limited Liability Company

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Gentleperson:

Enclosed are the original and one copy of the Articles of Organization for Umbrella Holdings, L.L.C. and an original and one copy of the Certificate of Designation of Registered Agent/Registered Office. Also enclosed is a check in the amount of \$155.00 payable to Florida Department of State for the following fees:

Articles of Organization filing fee Designation of Registered Agent Certified copy	\$100.00 \$ 25.00 \$ 30.00
TOTAL	\$155.00

Please file the enclosed Articles and forward evidence of the filing and the certified copy to me.

June 24, 2002 Page 2

If you have any questions, please do not hesitate to call me. Thank you for your prompt attention to this matter.

Very truly yours,

MOSKOWITZ, MANDELL, SALIM & SIMOWITZ, P.A.

Carolyn S. Gill, Legal Assistant

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Enclosures

cc: Mr. and Mrs. William Norkunas

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ARTICLES OF ORGANIZATION

OF

UMBRELLA HOLDINGS, L.L.C.

FILED 02 JUL -1 MID: 28 SEONLISSEE FLORIDA TALLANSSEE FLORIDA

A Florida Limited Liability Company

The undersigned, for the purpose of forming a limited liability company pursuant to the laws of the State of Florida, Florida Statutes, Chapter 608, hereby adopts the following Articles of Organization:

ARTICLE I - NAME:

The name of the Limited Liability Company is: Umbrella Holdings, L.L.C.

ARTICLE II - PURPOSE:

The purposes for which the limited liability company is organized is to transact any and all lawful business for which limited liability companies may be organized under Florida Statutes, Chapter 608.

ARTICLE III - DURATION:

The period of the limited liability company's duration is perpetual.

ARTICLE IV - ADDRESS OF THE COMPANY:

The mailing address of the principal office of the limited liability company is:

6103 Umbrella Tree Lane Tamarac, FL 33319

The street address of the principal office of the limited liability company is:

6103 Umbrella Tree Lane Tamarac, FL 33319

ARTICLE V - MANAGEMENT

The management of the limited liability company is reserved to its members. Each member shall have one vote on all matters. Initially, there is one member of the company but additional members may be added from time to time as provided below. The name and address of the initial sole member of the company is:

a. Norna Norkunas6103 Umbrella Tree LaneTamarac, FL 33319

ARTICLE VI - RIGHT TO ADMIT ADDITIONAL MEMBERS

Additional members may be admitted only upon the unanimous consent of the existing members, or as otherwise provided in the Regulations of the limited liability company.

ARTICLE VII - RIGHT TO CONTINUE BUSINESS

Upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any event which terminates the continued membership of a member of the limited liability company, the remaining members shall have the right to continue the business of the company.

ARTICLE VIII - AMENDMENTS

Amendments to these Articles of Organization shall be made in the manner provided by law.

WHEREFORE, the undersigned member has executed these Articles of Organization on this X day of May , 2002.

NORNA NORKUNAS, Member

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED AGENT, IN THE STATE OF FLORIDA.

7.	The name of the limited liability company is: Umbrella Holdings,	L.L.C.
2.	The name and address of the registered agent and office is:	艺 妇

William G. Salim, Jr., Esq. c/o Moskowitz, Mandell, Salim & Simowitz, P.A. 800 Corporate Drive, Suite 510 Ft. Lauderdale, FL 33334

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.

WILLIAM G. SALIM, JR., Registered Agent

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing was acknowledged before me this day of _______, 2002 by WILLIAM G. SALIM, JR. as Registered Agent. He is [/] personally known to me or ______ as identification.

Notary Public - Print Name

My Commission Expires:

[Seal]

Carolyn S. Gill
Commission # DD 002937
Expires March 19, 2005
Roaded Turu
Atlantic Bonding Co., Inc.

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