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ACCOUNT NO. : 072100000032	120
REFERENCE: 684080 7263431	-110
AUTHORIZATION: Tatucia Must	1
COST LIMIT : \$ 160.00	CC4 CUS
ORDER DATE: July 30, 2002 FLUC	
ORDER TIME : 11:23 AM	- <del></del>
ORDER NO. : 684080-005	7887087800
CUSTOMER NO: 7263431	
CUSTOMER: Ms. Pamela Waldorf Waldorf & Associates	3 F
2200 Centrepark West Drive Suite 100 West Palm Beach, FL 33409	: - : - 
DOMESTIC FILING	
NAME: SHARP SWORD, LLC	PA 92 J
EFFECTIVE DATE:	ECEIVED
XX ARTICLES OF ORGANIZATION	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	WED PRINCED
XX CERTIFIED COPY XX CERTIFICATE OF GOOD STANDING	
CONTACT PERSON: Ginger Simmons - EXT. 1139 EXAMINER'S INITIALS:	02 JI

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

SHARP SWORD, LLC

#### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

2200 Centrepark West Drive, Suite 100, West Palm Beach, FL 33409

#### ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

Perpetual.

#### ARTICLE IV - Management:

The Limited Liability Company is to be manager-managed company.

O2 JUL 30 PH 1: 52
SECRETARY FLORIDA
RALLAHASSEF FLORIDA

Signature of a member or an authorized representative of a member.

(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.)

PAMELA J. WALBORF
Typed or printed name of signee

## ARTICLE V- CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

The name and the Florida street address of the registered agent are:
Pamela J. Waldorf, Esq.
Name
2200 Centrepark West Drive, Suite 100 Street Address
West Palm Beach, FL 33409
City, State and Zip
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.  Signature