# 02000000,21559 ATTORNEYS AT LAW

27200 RIVERVIEW CENTER BOULEVARD SUITE 309 BONITA SPRINGS, FLORIDA 34134

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August 19, 2002

# VIA CERTIFIED MAIL RETURN RECEIPT REQUESTED

Florida Department of State Registration Section Division of Corporations PO Box 6327 Tallahassee, Fl 32314

300007256293--4 -08/21/02--01068--001 \*\*\*\*125.00 \*\*\*\*125.00

Re: CDD Investment Group, L.L.C.

Dear Sir or Madam:

Enclosed please find for filing Articles of Organization for Florida Limited Liability Company for the above-captioned limited liability company Also enclosed is a check made payable to the "Florida Department of State" in the amount of \$125.00 (\$100 filing fee and \$25 designation of registered agent fee).

Please contact me if you require additional information.

Very truly yours,

COHEN & GRIGSBY, P.C.

Carol Bender

Administrative Assistant

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Enclosures

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

CDD Investment Group, L.L.C.

#### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: c/o Vogue Interiors, 24520 Production Circle, Suite 5
Bonita Springs, FL 34135

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

-	treet address of the registered ag		
	Cohen & Grigsby, P.	G	Fol- 944
-	Name 27200 Riverview Cen Suite 309	ter Blvd.	
•	Florida street address (P.O. Box N	IOT acceptable)	
	Bonita SpringsF	L 34134	
-	City, State, and Zip	p	
liability company at the plate registered agent and agree statutes relating to the propaccept the obligations of management The Limited Liability	istered agent and to accept servince designated in this certificate, at to act in this capacity. I further per and complete performance on position as registered agent as Registered Agent (Check box if applicable.) To Company is to be managed by a managed company.	, I hereby accept the apport of agree to comply with the of my duties, and I am fam so provided for in Chapter 's Signature	e provisions of all pillar with and pillar with and 608, F.S. 2 AUG 21 AM
(An addit	tional article must be added if an	n effective date is request	ted)
	ture of a member or an authorized i	representative of a member.	ALTO A HELD ME I
(In ac of thi	ccordance with section 608.408(3), Flos document constitutes an affirmation he facts stated herein are true.)	orida Statutes, the execution	

Filing Fees:

Henry C. Cohen

Typed or printed name of signee

\$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)