L02000025741

FILED
SEP 30 PM 1:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ACCOUNT NO. : 072100000032

REFERENCE : ~~759147~~ ~~4359364~~ Patricia Pizuto

AUTHORIZATION :

COST LIMIT : $ 125.00

RECEIVED
02 SEP 30 PM 4:01

ORDER DATE : September 25, 2002

ORDER TIME : 12:43 PM

ORDER NO. : 759147-005

CUSTOMER NO: 4359364

CUSTOMER: Mr. Bruce D. Oberfest
Bruce D. Oberfest & Associates

287 King Street

Chappaqua, NY 10514

BK

DOMESTIC FILING

NAME: ARDENNES, LLC

200008113882--6

EFFECTIVE DATE:

_____ ARTICLES OF INCORPORATION
_____ CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea - EXT. 1114

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

ARDENNES, LLC

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ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

9 Chipmunk Lane, Ridgefield, CT 06877

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

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

Jeffrey Wells
Name

12209 Sunset Point Circle
Florida street address (P.O. Box **NOT** acceptable)

Wellington FL 33414
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 as provided for in Chapter 608, F.S.

Jeffrey Wells
By: Jeffrey Wells
Registered Agent's Signature

Article IV - Management (Check box if applicable.)
[x] The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Jeffrey Wells
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.)

Jeffrey Wells, Organizer
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)