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ROBERT M. BULFIN, P.A.

ATTORNEY AT LAW

2826 East Oakland Park Boulevard Fort Lauderdale, Florida 33306 TELEPHONE (954) 565-6002 TELEFAX (954) 565-0657

Mailing Address P.O. Box 24802

Fort Lauderdale, Florida 33307

ROBERT M. BULFIN

Via airborne express November 12, 2002

Secretary of State Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

Re: Doussard & Purcell Properties, LLC

Dear Sir or Madame:

Enclosed please find my check in the amount of \$155.00 for payment of the filing fee, Designation of Registered Agent fee, Certified copy fee, and Certificate of Status fee for the above newly proposed limited liability company.

Also, please find an original and a copy of the Articles of organization for the captioned company and Acceptance of Registered Agent. Please file the Articles and issue and return to me a conformed, stamped copy and a certified copy of the Articles of Organization and a Certificate of Status in the self-addressed, stamped envelope enclosed for your convenience.

Thank you for your consideration in this matter.

Very Truly Yours,

Robert M. Bulfin

RMB/bs Enclosures

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Doussard & Purcell Properties, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 355 SW 13th Street
Pompano Beach, FL 33069

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

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

<u>Roland W. Doussard</u>		
Name		
355 SW 13th Street		
Florida street address (P.O. Box NOT acceptable)		
Pompano Beach,	FL 33021	
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.

Registered Agent's Signature

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

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.)

Roland W. Doussard

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)

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