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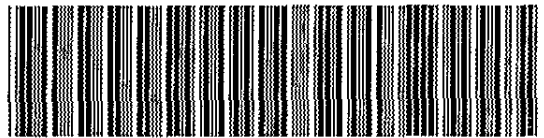
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ACCOUNT NO. : 072100000032

REFERENCE : 826550 4331939

AUTHORIZATION : *Patricia Ryzant*

COST LIMIT : \$ 125.00

ORDER DATE : November 20, 2002

ORDER TIME : 9:34 AM

ORDER NO. : 826550-005

CUSTOMER NO: 4331939

CUSTOMER: Mark Gallegos, Esq  
Greenberg Traurig, P.a.  
515 East Las Olas Boulevard  
Suite 1500  
Fort Lauderdale, FL 33301

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NAME: BLACKSHIELD PLATYPUS, L.L.C.

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: Norma Parramore - EXT. 1147

EXAMINER'S INITIALS: \_\_\_\_\_

**ARTICLES OF ORGANIZATION**

**OF**

**BLACKSHIELD PLATYPUS, L.L.C.**

The undersigned, desiring to form a limited liability company, under and in conformity with the laws of the State of Florida, does hereby make this written certificate and verify:

**ARTICLE I - Name**

The name of the limited liability company shall be **Blackshield Platypus, L.L.C.** (hereinafter, the "Company").

**ARTICLE II - Address of Principal Office**

The mailing address and street address of the principal office of the Company is

Blackshield Platypus, LLC  
10251 NW 32<sup>nd</sup> Street  
Sunrise, FL 33351

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

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

Cristina Rodriguez  
2109 Nova Village Drive  
Davie, FL 33317

Having been named registered agent and to accept service of process of 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

**ARTICLE IV - Duration**

The period of duration for the Company shall be perpetual.

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#### ARTICLE V - Management

The Company is to be managed by a board of managers. The names and addresses of initial managers are:

Matthew A. Mitchell- 10251 NW 32<sup>nd</sup> Street, Sunrise, FL 33351

Cristina Rodriguez- 10251 NW 32<sup>nd</sup> Street, Sunrise, FL 33351

#### ARTICLE VI - Admission of Additional Members

The members shall have the right to admit additional members upon the approval of the organizational member named herein and the remaining members holding a majority of the membership interests not owned by the organizational member.

#### ARTICLE VII - Members Rights to Continue Business

The business of the Company shall continue upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Company.

EXECUTED by on behalf of the undersigned member on the 19<sup>th</sup> day of Nov. 2002. In accordance with Section 608.408(3) of the Florida Limited Liability Company Act, the execution of the foregoing constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

By: [Signature]  
Name: CRISTINA RODRIGUEZ  
Title: MANAGER

By: \_\_\_\_\_  
Name: \_\_\_\_\_  
Title: \_\_\_\_\_

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