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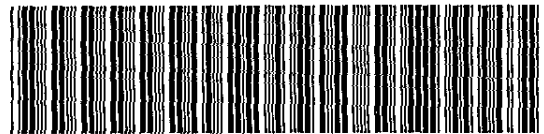
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**LAW OFFICES OF
KENNEDY & ASSOCIATES, P.L.**

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To Matters of Federal Tax Law

** Also Admitted in Colorado and Montana

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November 20, 2002

VIA FEDERAL EXPRESS

Secretary of State
Division of Corporations
409 East Gaines Street (32301)
Post Office Box 6327
Tallahassee, FL 32314

Re: PLSM Management, LLC and Streat & Associates, LLC

Dear Sir/Madam:

Enclosed please find one (1) original and one (1) copy of the Articles of Organization for each of the above referenced limited liability companies. Upon filing of same, please return one (1) certified copy for each limited liability company, stamped with the date and time the document has been accepted for filing. I have enclosed a self-addressed, stamped envelope for the return of the requested documents, along with our check in the amount of \$310 for the following:

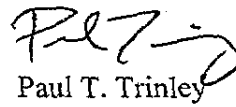
Filing fees for the LLCs:	\$200
Designation of Agents:	\$ 50
Certified copies:	<u>\$ 60</u>
TOTAL:	\$310

Secretary of State
November 20, 2002
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Please do not hesitate to contact me if you should have any questions.

Sincerely,

KENNEDY & ASSOCIATES, P.L.


Paul T. Trinley

PTT/tas
Enc.

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Streat & Associates, LLC

ARTICLE II - Address:

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

254 N.W. 6th Avenue, Boca Raton, FL 33432

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

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

Philip P. Streat
Name
254 N.W. 6th Avenue
Florida street address (P.O. Box **NOT** acceptable)
Boca Raton FL 33432
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..

X Philip Streat
Registered Agent's Signature

Article IV - Management (Check box if applicable.)

☐ 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)

X Philip Streat
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.)

Philip P. Streat, Authorized Representative
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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TALLAHASSEE, FLORIDA

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