

L020000031578

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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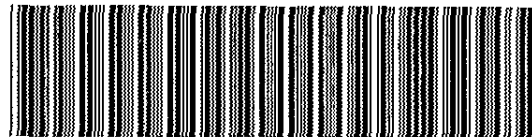
(Business Entity Name)

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ACCOUNT NO. : 072100000032

REFERENCE : 832422 5132370

AUTHORIZATION :

COST LIMIT : \$ 155.00

Patricia P. Pugh

ORDER DATE : November 22, 2002

ORDER TIME : 3:49 PM

ORDER NO. : 832422-015

CUSTOMER NO: 5132370

CUSTOMER: Ms. Esther Berglas
Stuart R. Morris, P.a.

7000 West Palmetto Park Road
Suite 310
Boca Raton, FL 33433

DOMESTIC FILING

NAME: DEERA PLUS, LLC

EFFECTIVE DATE:

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

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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

CONTACT PERSON: Jamela Abaied - EXT. 1136

EXAMINER'S INITIALS: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR DEERA PLUS, LLC

ARTICLE I

Name

The name of the Limited Liability Company is: DEERA PLUS, LLC

ARTICLE II

Address

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

2556 University Drive
Coral Springs, Florida 33065

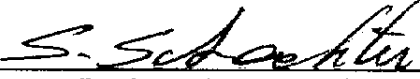
ARTICLE III

Registered Agent, Registered Office, & Registered Agent's Signature

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

Samuel Schachter
2556 University Drive
Coral Springs, Florida 33065

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

ARTICLE IV

Management

The Limited Liability Company is to be managed by one manager or more managers and therefore, a manager - managed company.


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.)

SAMUEL SCHACHTER
Typed or printed name of signee

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AND
FILED

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

DEERA PLUS, LLC

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

Samuel Schachter
2556 University Drive
Coral Springs, Florida 33065

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.


Signature

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