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Division of Corporations

Fax Number : (850)205-0383

Account Name : ANGELO, BARRY & BOLDT, P.A.

Account Number : 120020000109 Phone : (954)766-9930 Fax Number : (954)766-9937

LIMITED LIABILITY COMPANY

JERO LIMA, L.L.C.

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

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ARTICLES OF ORGANIZATION

OF

JERO LIMA, L.L.C.

ARTICLE I

NAME

The name of the limited liability company shall be Jero Lima, L.L.C.

ARTICLE II

MAILING AND STREET ADDRESS

The mailing address and the street address of the limited liability company is 6300 N.E. 1st Avenue, Suite 300, Fort Lauderdale, Florida 33334.

ARTICLE III

INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The address of the initial registered office of the limited liability company is 515 East Las Olas
Boulevard, Suite 850, Fort Lauderdale, Florida 33301, and the name of its initial registered agent at such address is Angelo, Barry & Boldt, P.A.

ARTICLE IV

MANAGEMENT AND MEMBERS

The management of the limited liability company is reserved to its initial managing members; Jeffrey S. Roschman and Robert J. Roschman. The address of the initial managing members is 6300 N.E. 1st Avenue, Suite 300, Fort Lauderdale, Florida 33334.

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ARTICLE V

EXISTENCE OF LIMITED COMPANY

The existence of the limited liability company shall begin on the date the undersigned has executed these Articles of Organization.

The undersigned, being the initial managing members of the limited liability company, hereby certify that the foregoing constitutes the proposed Articles of Organization of Jero Lima, L.L.C.

IN WITNESS WHEREOF, for the purpose of forming this limited liability company under the laws of the State of Florida, the undersigned, constituting the initial managing members of this limited liability company, has executed these Articles of Organization this _____ day of January, 2003.

	Qu-		_
	Jeffrey S. Roschman Rotert J. Roschman		
STATE OF FLORIDA	\cdot		
) SS.:		
COUNTY OF BROWARD)		
	Is acknowledged before me this <u>day of January</u> , J. Roschman. They are personally known to make as identification.		
	Print or Stamp Name: MARY PAT HEVENER	, , , , , , , , , , , , , , , , , , ,	
-	Notary Public, State of FLORIDA	1 2 <u>5</u>	
	Commission No.: DD 069941	· `	्र - फ़ु
-	My Commission Expires: MARY PAT HEVENER MY COMMISSION # DE 089941	#### ####	: 37
	EXPIRES: March 3, 2005 Scotcad Thru Notary Public Unservitors		

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ACCEPTANCE OF APPOINTMENT BY REGISTERED AGENT

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.

Angelo, Barry & Bolds F.A.

Bv:

Thomas P. Angelo, CEO

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