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To: Division of Corporations  
Fax Number : (850) 205-0393

From: Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC  
Account Number : 075350000353  
Phone : (212) 431-5000  
Fax Number : (212) 431-1441

RECEIVED  
03 JAN 22 AM 8:00  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**LIMITED LIABILITY COMPANY**

**M. FINE & SONS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

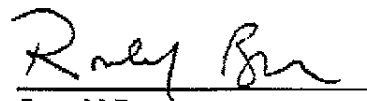
**ARTICLES OF ORGANIZATION**  
**OF**

**M. FINE & SONS LLC**

The undersigned hereby forms and establishes a limited liability company in accordance with section 608.408(3), Florida Statutes as follows:

- FIRST:** The name of the Limited Liability Company is:  
**M. FINE & SONS LLC**
- SECOND:** The mailing address and street address of the principal office of the Limited Liability Company is:  
**10250 Collins Ave**  
**Suite PH1**  
**Balharbour, FL 33154**
- THIRD:** The name and the Florida street address of the registered agent are:  
**Dr. Jeffrey L. Fine**  
**10250 Collins Ave**  
**Suite PH1**  
**Balharbour, FL 33154**

**IN WITNESS WHEREOF**, the undersigned does hereby attest that (s) he is authorized to subscribe this Certificate of Formation on behalf of the Limited Liability Company on this 15 day of January, 2003

  
\_\_\_\_\_  
**Ronald Brown**  
Organizer

**Blumberg Excelsior Corporate Services, Inc.**  
**62 White St.**  
**New York, NY 10013**

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2003 JAN 21 AM 8:21  
JULY 30 CORPORATIONS  
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BLUMB CORP SVCS

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Jan 21 2003 15:20 P.03

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**ACCEPTANCE OF APPOINTMENT**

**AS**

**REGISTERED AGENT**

**OF**

**M. FINE & SONS LLC**

FILED  
2003 JAN 21 AM 8:27  
DR. JEFFREY L. FINE  
TALLAHASSEE, FLORIDA

I, the undersigned, do hereby accept appointment as Registered Agent for the within named limited liability company.

Dated: January 15, 2003.



**Dr. Jeffrey L. Fine**  
*Registered Agent*

**Blumberg Excelsior Corporate Services**  
62 White St.  
New York, NY 10013

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