

L030000010200

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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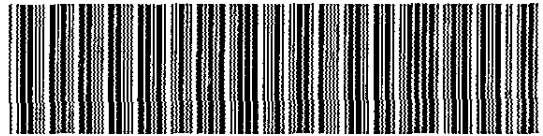
(Business Entity Name)

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TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 976786 4724864

AUTHORIZATION :

Patricia Knight

COST LIMIT : \$ 155.00

ORDER DATE : March 20, 2003

ORDER TIME : 3:34 PM

ORDER NO. : 976786-005

CUSTOMER NO: 4724864

CUSTOMER: Mr. Robert Sandler
Robert Sandler Esquire

10751 Stonebridge Boulevard

Boca Raton, FL 33498

DOMESTIC FILING

NAME: MAINSTREET COMMERCE LC

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: Susie Knight - EXT. 1156

EXAMINER'S INITIALS: _____

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MainStreet Commerce LC

ARTICLE II - Address:

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

10702 Cypress Bend Drive, Boca Raton, Florida 33498

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

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

Michael Sandler
Name
10702 Cypress Bend Drive
Florida street address (P.O. Box **NOT** acceptable)
Boca Raton FL 33498
City, State, and Zip

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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.

Michael Sandler

By: M. Sandler

Registered Agent's Signature

(An additional article must be added if an effective date is requested)

M. Sandler

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.)

MICHAEL SANDLER

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)