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TALLAHASSEE, FLORIDA

ACCOUNT NO. : 072100000032

REFERENCE : 074728 10463A

AUTHORIZATION :

COST LIMIT : \$ 155.00

Patricia Pignato

ORDER DATE : April 29, 2003

ORDER TIME : 5:11 PM

ORDER NO. : 074728-005

CUSTOMER NO: 10463A

CUSTOMER: Ms. Larissa K. Lincoln
Cohen Norris Scherer
Weinberger & Wolmer
Suite 400
712 U.s. Highway 1
North Palm Bch, FL 33408-7146

DOMESTIC FILING

NAME: WALKABOUT RESIDENTIAL COMPANY,
LLC

~~EFFECTIVE DATE: 04/29/2003~~

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Jamela Abaied - EXT. 1136

EXAMINER'S INITIALS: _____

**ARTICLES OF ORGANIZATION OF
WALKABOUT RESIDENTIAL COMPANY, LLC**

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The undersigned hereby forms and establishes a limited liability company pursuant to **CHAPTER 608, FLORIDA STATUTES** as follows: **TALLAHASSEE, FLORIDA**

ARTICLE I

The name of this limited liability company is **WALKABOUT RESIDENTIAL COMPANY, LLC**.

ARTICLE II

This limited liability company shall become effective on **APRIL 29, 2003**, unless sooner terminated as provided in the Operating Agreement executed or to be executed by the members

ARTICLE III

The mailing address and street address of the principal place of business of this limited liability company is **2500 Quantum Lakes Dr., #101, Boynton Beach, FL 33426**. This limited liability company may, at its discretion, change the address of its principal place of business.

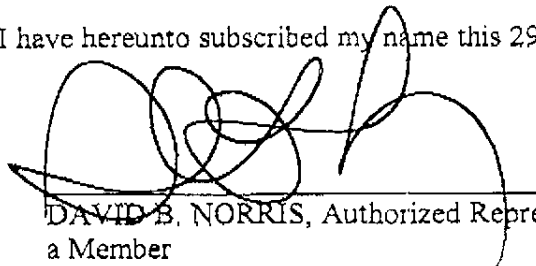
ARTICLE IV

The name and street address of the initial registered agent of this limited liability company is **DAVID B NORRIS, 712 U.S. Highway One, Ste 400, North Palm Beach, FL 33408**.

ARTICLE V

Additional members may be admitted to this limited liability company upon such terms and conditions as shall be established by the members as described in the Operating Agreement.

IN TESTIMONY WHEREOF, I have hereunto subscribed my name this 29th day of April, 2003.



DAVID B. NORRIS, Authorized Representative of a Member

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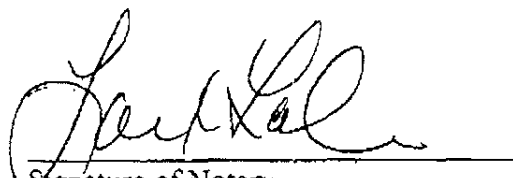
03 APR 29 AM 9:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA)
)
COUNTY OF PALM BEACH)

The foregoing instrument was acknowledged before me this 29th day of April, 2003, by DAVID B. NORRIS, who is personally known to me or who has produced Florida State Driver's License Number P/A as identification and who did () or did not () take an oath.

Executed this 29th day of April, 2003.



Signature of Notary
Printed Name: LARISSA K. LINCOLN
My Commission Expires:
My Commission Number.

