Florida Department of State

Division of Corporations
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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : FOWLER, WHITE, BURNETT, ET AL

Account Number: 071250001512 Phone: (305)789-9200

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LIMITED LIABILITY COMPANY

BLPSmall, LLC

Certificate of Status	0
Certified Copy	1
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Audit No. H03000191930 4

ARTICLES OF ORGANIZATION

OF

BLPSmall, LLC

ARTICLE I

The name of the limited liability company formed hereby is **BLPSmall**, **LLC** (the "Limited Liability Company").

ARTICLE II

The duration of the Limited Liability Company shall be perpetual.

ARTICLE III

The principal office and mailing address of the Limited Liability Company shall be as follows:

c/o Buckner P. Harris (Goodman) B.A. Harris & Associates 960 Broadway, Suite 314 Boise, Idaho 83706

ARTICLE IV

The Registered Agent of the Limited Liability Company and his street address in the State of Florida are as follows:

Christopher E. Knight, Esq. 100 S.E. 2nd Street, 18th Floor Miami, Florida 33131 Audit No. H03000191930 4

ARTICLE Y

The Limited Liability Company shall be manager-managed.

Christopher E. Knight,

as Authorized Representative of the Members

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE	·)
Before me personally appea Members, who is personally kn as identification, to be	ared Christopher E. Knight, as Authorized Representative of the nown to me, or \square who produced ethe person who executed the foregoing Articles of Organization.
In witness whereof I have h	ereunto set my hand and official seal this 12 day of

Judith D. Rodman
Commission # 100 057448
Expires Oct. 18, 2008
Bonded Thru
Attentic Bonding Co., Inc.

Notary Public

Print Name: GOITH D. ROMAN

My Commission expires: 10/14/2005

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CERTIFICATE OF DESIGNATION OF RESIDENT AGENT AND ACCEPTANCE OF DESIGNATION

Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned limited liability company organized under the laws of the state of Florida, submits the following statement in designating its Registered Office and Registered Agent in the State of Florida:

- 1. The name of the limited liability company is BLPSmall, LLC.
- 2. The name and address of the Registered Agent and Office is:

Christopher E. Knight, Esq. 100 S.E. 2nd Street, 18th Floor Miami, Florida 33131

Having been named as Registered Agent and to accept service of process for the above stated limited liability company at the place designated in the 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 am familiar with and accept the obligations of my position as Registered Agent.

Christopher E. Knight, Registered Agent

Date: May 12, 2000

BLPSmall, LLC

Christopher E. Knight,

as Authorized Representative

of the Members

Audit No. H03000191930 4

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