

L03000019575

(Requestor's Name)

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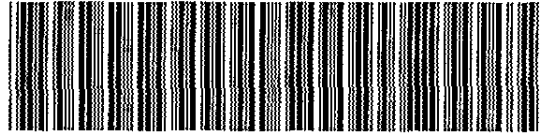
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TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 112901 5030952

AUTHORIZATION : *Patricia Pizito*

COST LIMIT : \$ 125.00

ORDER DATE : May 30, 2003

ORDER TIME : 2:15 PM

ORDER NO. : 112901-025

CUSTOMER NO: 5030952

CUSTOMER: Mr. Andrew I. Lewis
Phillips, Eisinger, Koss,
Rothstein & Rosenfeldt, P.a.
Suite 265 South
4000 Hollywood Boulevard
Hollywood, FL 33021

03 MAY 30 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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NAME: FORT FAMILY 4, L.L.C.

EFFECTIVE DATE:

____ ARTICLES OF INCORPORATION
____ CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan - EXT. 1155

EXAMINER'S INITIALS: _____

**Articles of Organization
for
Fort Family 4, L.L.C.**

**ARTICLE I.
Name**

The name of the limited liability company (the "Company") is:

Fort Family 4, L.L.C.

**ARTICLE II.
Mailing and Street Address**

The mailing address and street address of the Company is 550 Brickell Avenue Suite 200, Miami, Florida 33131.

**ARTICLE III.
Registered Agent**

The name and street address of the initial registered agent of the Company for service of process in the State of Florida is GARY S. PHILLIPS, 4000 Hollywood Boulevard, Suite 265 South, Hollywood, Florida 33021.

**ARTICLE IV.
Subscriber**

The name and address of the person executing these Articles of Organization as an authorized representative of a Member of the Company is GARY S. PHILLIPS, 4000 Hollywood Boulevard, Suite 265 South, Hollywood, Florida 33021. Said person shall not be liable, in any form or fashion, for any acts or omissions of the Company.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 27th day of May, 2003.



GARY S. PHILLIPS

STATE OF FLORIDA)

:ss

COUNTY OF BROWARD)

BEFORE ME, a Notary Public authorized in the County and State set forth above, personally appeared GARY S. PHILLIPS, personally known to me, or who has produced _____ as identification, to be the person who, as an authorized representative of a Member of the Company, executed the foregoing Articles of Organization of Fort Family 4, L.L.C., and he acknowledged before me that he executed same.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the County and State last aforesaid, this 27th day of May, 2003.



Andrew I. Lewis
MY COMMISSION # CC912171 EXPIRES
June 19, 2004
BONDED THRU TROY FAIN INSURANCE, INC.



NOTARY PUBLIC - State of Florida

Andrew I. Lewis

Name of Notary - Please Print

My Commission Expires:

SECRETARY OF STATE
PHILIP S. REE, IV
TALLAHASSEE, FLORIDA

03 MAY 30, PM 4:15

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ACCEPTANCE BY REGISTERED AGENT

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED COMPANY, AT THE PLACE DESIGNATED IN ARTICLE III OF THESE ARTICLES OF ORGANIZATION, THE UNDERSIGNED HEREBY ACKNOWLEDGES THAT HE IS FAMILIAR WITH, AND ACCEPTS, THE OBLIGATIONS OF THAT POSITION, AND FURTHER AGREES TO ACT IN THIS CAPACITY, AND TO COMPLY WITH THE COMPLETE DISCHARGE OF HIS DUTIES.

DATED THIS 27TH DAY OF MAY, 2003.



GARY S. PHILLIPS

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 MAY 30 11 40 AM

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