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Account Name : ADORNO & YOSS, P.A.
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LIMITED LIABILITY COMPANY

SKLAVER FAMILY, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
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**ARTICLES OF ORGANIZATION
OF
SKLAVER FAMILY, LLC**

These Articles of Organization are made for the purpose of organizing a Florida Limited Liability Company under the Florida Limited Liability Act, Chapter 608, Florida Statutes.

**ARTICLE I
NAME**

The name of this limited liability company is SKLAVER FAMILY, LLC (the "Company").

**ARTICLE II
ADDRESS**

The Company's mailing address and street address of the principal office of the Company is 3420 Paddock Road, Weston, Florida 33331.

**ARTICLE III
DURATION**

The period of duration for the Company will be perpetual.

**ARTICLE IV
REGISTERED AGENT AND OFFICE**

The name of the initial registered agent of the Company is Jane Sklaver, and her address is 3420 Paddock Road, Weston, Florida 33331.

The undersigned executed these Articles of Organization on this 12 day of June 2003.

Authorized Representative of the Members:

(In accordance with Section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)



Jane Sklaver

03 JUN 13 AM 9:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
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**CERTIFICATE OF DESIGNATION
OF REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

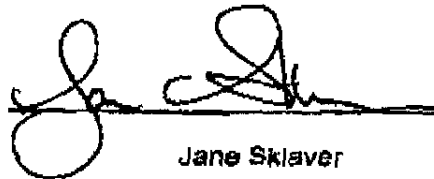
1. The name of the limited liability company is:

SKLAVER FAMILY, LLC

2. The name and the Florida address of the registered agent are:

Jane Sklaver
3420 Paddock Road
Weston, FL 33331

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.


Jane Sklaver

03 JUN 13 AM 9:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
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