

LD3 000024475

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(Business Entity Name)

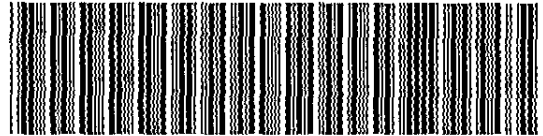
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CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 157210 4301772

AUTHORIZATION :

Patricia Pignatelli

COST LIMIT : \$ 125.00

ORDER DATE : July 3, 2003

ORDER TIME : 10:24 AM

ORDER NO. : 157210-005

CUSTOMER NO: 4301772

CUSTOMER: Ms. Erin Berry
Pavia & Harcourt LLP

12th Floor
600 Madison Avenue
New York, NY 10022

DOMESTIC FILING

NAME: YURMAN RETAIL FLORIDA, LLC

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: Darlene Ward - EXT. 1135

EXAMINER'S INITIALS:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION
OF
YURMAN RETAIL FLORIDA, LLC

ARTICLE I: The name of the Limited Liability Company is:

YURMAN RETAIL FLORIDA, LLC.

ARTICLE II: The mailing address and street address of the principal office of the Limited Liability Company are:

501 Madison Avenue, 8th Floor
New York, New York 10022-5602

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

Corporation Service Company
1201 Hays Street
Tallahassee, FL 32301

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.

Corporation Service Company

By:

Bonnie H. Yancy
Registered Agent's Signature

[Signature]
Signature of 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.)

Ralph Galasso, as Representative of Member

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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