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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : NASON, YEAGER, GERSON, WHITE & LICCE, P.A.

Account Number : 073222003555 Phone : (561)686-3307 Fax Number : (561)686-5442

LIMITED LIABILITY COMPANY

Falcon Young Pines Commercial, LLC

 Certificate of Status
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 1

 Page Count
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 Estimated Charge
 \$155.00

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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 8, 2003

NASON, YEAGER, GERSON, WHITE & LICCE, P.A.

SUBJECT: FALCON YOUNG PINES COMMERCIAL, LLC

REF: W03000019210

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please return your document, along with a copy of this letter, within 68 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Document Specialist FAX Aud. #: E03000227354 Letter Number: 303A00040293

Division of Corporations - P.O. BOX 6327 - Tallabassee, Florida 32314

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P.03

ARTICLES OF ORGANIZATION OF

FALCON YOUNG PINES COMMERCIAL, LLC

I, the undersigned authorized representative of the Members, hereby make, acknowledge and file these Articles of Organization for the purpose of forming a limited liability company under the laws of the State of Florida.

The name of this Limited Liability Company is:

FALCON YOUNG PINES COMMERCIAL, LLC

The mailing address of the principal office is:

7602 Marblehead Lane Parkland, Florida 33067

> ARTICLE III DURATION

The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE IV MANAGEMENT

The powers of the Limited Liability Company shall be exercised by or under the authority of, and the business and affairs of the Limited Liability Company shall be managed under the direction of its Managing Members and is, therefore, a manager-managed company.

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IN WITNESS WHEREOF, the undersigned authorized representative of the Members has made and subscribed these Articles of Organization at West Palm Beach, Florida, for the uses and purposes aforesaid, this 7th day of July, 2003.

Gary N. Gerson, Authorized Representative of the

Members

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 of 608.507, 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:

FALCON YOUNG PINES COMMERCIAL, LLC

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

Gary N. Gerson 1645 Palm Beach Lakes Blvd. Suite 1200 West Palm Beach, Florida 33401

Having been named as registered agent to accept service of process for the above-stated limited liability company, at the location designated herein, I hereby consent to and accept the appointment to act in this capacity, acknowledge that I am familiar with and accept the obligations of a registered agent and agree to comply with the laws of Florida applicable thereto.

Gary N. Gerson, Registered Agent

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