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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Placemakers Fort Lauderdale LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bruce Krongelb
(Name of Person)

Placemakers Fort Lauderdale LLC
(Firm/Company)

4648 Old Winter Garden Road
(Address)

Orlando, Florida 32811
(City/State and Zip Code)

For further information concerning this matter, please call:

Bruce Krongelb at (407) 292-1010
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Placemakers Fort Lauderdale LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

Placemakers Fort Lauderdale LLC Placemakers Fort Lauderdale
4648 Old Winter Garden Rd 4648 Old Winter Garden Rd
Orlando, FL 32811 Orlando, FL 32811

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature

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

Bruce Krongelb
Name

4648 Old Winter Garden Road
Florida street address (P.O. Box **NOT** acceptable)

Orlando, FL 32811
City, State, and Zip

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..

Bruce Krongelb
Registered Agent's Signature

(CONTINUED)

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JUL 21 PM 3:00
CLERK OF DISTRICT COURT
LAKE COUNTY, FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

John J. Deleo Sr.
3247 NW 22nd Avenue
Oakland Park, FL 33309

MGRM

Cork Chicota
8906 West Bowles Avenue, Suite 22
Littleton, CO 80123

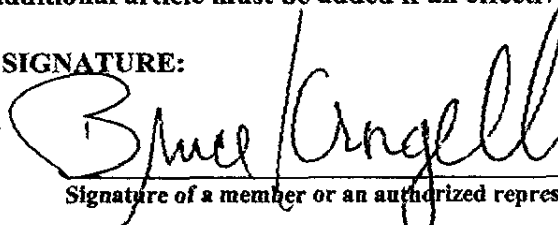
MGRM

Bruce Krongelb
4648 Old Winter Garden Road
Orlando, FL 32811

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 608.40(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Bruce Krongelb

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 JUL 21 PM 3:00

FILED