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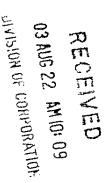
From:

Account Name : FILINGS. INC.
Account Number : 072720000101
Phone : (850)385-6735
Fax Number : (954)641-4192

LIMITED LIABILITY COMPANY

NET TRUST MORTGAGE, LLC

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$125.00 |



827-03

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ARTICLES OF ORGANIZATION FOR NET TRUST MORTGAGE, LLC

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I - Name

The name of the Limited Liability Company is: NET TRUST MORTGAGE, LLC.

ARTICLE II - Address

The mailing address and street address of the principal office of the Limited Liability Company is: 6618 Thornhill Court, Boca Raton, Florida 33433.

ARTICLE III - Regletered Agent, Registered Office, and Registered Agent's Signature

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

Benjamin P. Shenkman, Esq. 2160 W. Atlantic Ave., Second Floor Delray Beach, Florida 33445

Having been named as registered agent 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, Florida Statutes.

Registered Agent's Signature

IN WITNESS WHEREOF. I have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this 21st day of AUDIT, 2003.

(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)

Authorized Representative Signature

Printed Name: Benjamin P. Shenkman

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 808.415 OR 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:

NET TRUST MORTGAGE, LLC

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

BENJAMIN P. SHENKMAN, ESQ. 2160 W. Atlantic Ave., Second Floor Dolray Beach, FL 33445

Having been named as registered agent 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, Florida Statutes.

Registered Agent's Signature

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