

Sent By: MASTRIANA AND CHRISTIANSEN;  
Division of Corporations

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Aug-22-03 15:40;

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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)205-0383

From:

Account Name : MASTRIANA & CHRISTIANSEN, P.A.  
Account Number : T19990000141  
Phone : (954) 566-1234  
Fax Number : (954) 564-0222

**LIMITED LIABILITY COMPANY**

**STRPMC, LLC**

|                       |          |
|-----------------------|----------|
| Certificate of Status | 1        |
| Certified Copy        | 0        |
| Page Count            | 01       |
| Estimated Charge      | \$130.00 |

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*JB 8/25/03*

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I Name:

The name of the Limited Liability Company is:  
STRPMC, LLC

ARTICLE II Address:

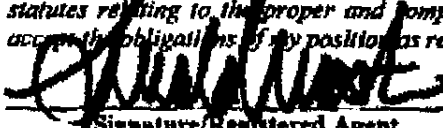
The mailing address and street address of the principal office of the Limited Liability Company is:  
2455 E. Sunrise Boulevard, Suite 916  
Fort Lauderdale, FL 33304

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

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

F. Ronald Mastriana, Esq.  
Mastriana & Christiansen, P.A.  
1500 N. Federal Hwy., Suite 200, Fort Lauderdale, FL 33304

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.

  
Signature/Registered Agent

ARTICLE IV Management (Check below if applicable.)

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested.)

  
Signature of a 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.

John McDonald

Typed or printed name of signee.

Filing Fee:

\$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)

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