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From:

Account Name : PAUL M. BLOOMGARDEN, P.A.
Account Number : I20010000022
Phone : (954) 370-2222
Fax Number : (954) 370-2211

LIMITED LIABILITY COMPANY

GARY CHIN ENTERPRISES, LLC

Certificate of Status	0
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**ARTICLES OF ORGANIZATION
OF
GARY CHIN ENTERPRISES, LLC**

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

ARTICLE I — NAME

The name of the Limited Liability Company shall be GARY CHIN ENTERPRISES, LLC ("Company").

ARTICLE II — ADDRESS

The mailing address and street address of the principal office of the Company shall be 16902 SW 34th Street, Miramar, Florida 33027.

ARTICLE III — REGISTERED OFFICE AND AGENT

The name and the Florida street address of the registered agent is Philip C. Rosen, 8551 W, Sunrise Blvd., Suite 208, Ft. Lauderdale, FL 33322.

ARTICLE IV — INITIAL MEMBER

The initial member of the Company is:

Title: Managing Member
GARY C. CHIN
16902 SW 34TH STREET
MIRAMAR, FLORIDA 33027

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 17th day of December, 2003.



PHILIP C. ROSEN, Authorized Representative

(In accordance with section 608.408(3), Florida Statutes, the execution of this change constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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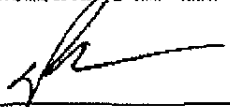
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GARY CHIN ENTERPRISES, LLC

STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. 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 under Chapter 608, Florida Statutes.

(In accordance with section 608.408(3), Florida Statutes, the execution of this statement constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)



PHILIP C. ROSEN
Registered Agent

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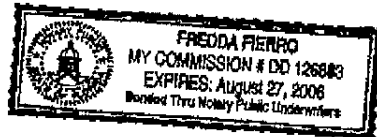
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STATE OF FLORIDA
COUNTY OF BROWARD

Sworn to and subscribed before me this 17th day of December, 2003, by PHILIP C. ROSEN,
who is personally known to me or has provided his Florida driver's license as identification and who
did take an oath.




Notary Public

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