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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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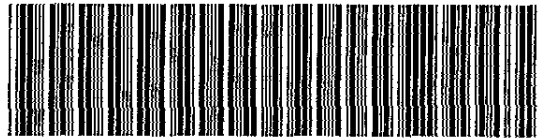
(Business Entity Name)

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DIVISION OF CORPORATION

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TALLAHASSEE, FLORIDA

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CORPORATION SERVICE COMPANY™

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TALLAHASSEE, FLORIDA

ACCOUNT NO. : 072100000032

REFERENCE : 407680 4362770

AUTHORIZATION :

Patricia Pardo

COST LIMIT : \$ 155.00

ORDER DATE : January 23, 2004

ORDER TIME : 11:44 AM

ORDER NO. : 407680-005

CUSTOMER NO: 4362770

CUSTOMER: Michael Male, Esq.
Michael H. Male, P.a.

Suite 303
3250 Mary Street
Miami, FL 33133

DOMESTIC FILING

NAME: WILLIAMS STREET ASSOCIATES,
LLC

EFFECTIVE DATE:

 ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan - EXT. 2955

EXAMINER'S INITIALS: _____

**ARTICLES OF ORGANIZATION
OF
WILLIAMS STREET ASSOCIATES, LLC**

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Article I - Name

The name of the Limited Liability Company is **WILLIAMS STREET ASSOCIATES, LLC.**

Article II - Address

The mailing address and street address of the principal office of the Limited Liability Company is 136 Madeira Road, Islamorada, Florida 33036.

Article III - Duration

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

Article IV - Management

The Limited Liability Company is to be managed by its members and the name(s) and address(es) of the member(s) who is/are to serve as the initial managing member(s) is/are:


**Rockfish Development, LLC
136 Madeira Road
Islamorada, Florida 33036**

Article V - Admission of Additional Members

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be as stated in the Operating Agreement.

Article VI - Members Rights to Continue Business

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be as stated in the Operating Agreement.



Signature of a member or an authorized
Representative of a member
Print name: **Michael H. Male**


**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 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 **WILLIAMS STREET ASSOCIATES, LLC**
2. The name and the Florida street address of the registered agent are:

**Michael H. Male, Esq.
Michael H. Male, P.A.
3250 Mary Street, Suite 303
Miami, Florida 33133**

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 property and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



Signature