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Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name

: NASON, YEAGER, GERSON, WHITE & LIOCE, P.A.

Account Number: 073222003555

Phone Fax Number

: (561)686-3307 . (561)686-5442

LIMITED LIABILITY COMPANY

Transeastern Tradition, LLC

Certificate of Status	0
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ARTICLES OF ORGANIZATION

OF

TRANSEASTERN TRADITION, LLC

I, the undersigned authorized representative of the Sole Member, hereby make, acknowledge and file these Articles of Organization for the purpose of forming a limited liability company under the laws of the State of Florida.

ARTICLE I NAME

The name of this Limited Liability Company is:

TRANSEASTERN TRADITION, LLC

ARTICLE II ADDRESS

The mailing address of the principal office is:

3300 University Drive, Suite 001 Coral Springs, Florida 33065

ARTICLE III DURATION

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

<u>ARTICLE IV</u> MANAGEMENT

The powers of the Limited Liability Company shall be exercised by or under the authority of, and the business and affairs of the Limited Liability Company shall be managed under the direction of its Sole Member and is, therefore, a member-managed company.

IN WITNESS WHEREOF, the undersigned authorized representative of the Sole Member has made and subscribed these Articles of Organization at West Palm Beach, Florida, for the uses and purposes aforesaid, this 30th day of January, 2004.

Gary N. Gerson, Authorized Representative of the

Sole Member

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:

TRANSEASTERN TRADITION, LLC

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

Gary N. Gerson 1645 Palm Beach Lakes Blvd. Suite 1200 West Palm Beach, Florida 33401

Having been named as registered agent to accept service of process for the above-stated limited liability company, at the location designated herein, I hereby consent to and accept the appointment to act in this capacity, acknowledge that I am familiar with and accept the obligations of a registered agent and agree to comply with the laws of Florida applicable thereto.

Gary N. Gerson, Registered Agent

SECRETARY OF STATE
SIVISION OF CORPORATIONS
ON FER -3 PM 4: 30

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