8100100018

(Requestor's Name)	
(uednesm s maue)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
,	
Certified Copies Certificates of Status	
Dorandados di Ciatas	_
	7
Special instructions to Filing Officer:	Ì
1/29 FCIC	
`	ı
	╛

Office Use Only



100027626891

MUM

01/29/04--01051--007 **125.08

1- II. (-1)



Allan Milledge Bruce Franklin Iden Of Counsel: John M. Milledge

January 27, 2004

Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, Florida 32314

Re: Wisper Three, LLC

Our File No.: HALPIN-1

Dear Sir/Madam:

Enclosed please find the Articles of Organization for Wisper Three, LLC. Enclosed also is our check in the amount of \$125.00 covering the filing fee of \$100.00 plus the registered agent fee of \$25.00.

Please provide the undersigned with a certificate of status for this new entity.

Thank you very much for your attention to these matters.

Sincerely,

Marisol Ingram

Legal Assistant to Bruce F. Iden

/mi Encs.

C:\Documents and Settings\Marisol\My Documents\BFI\HALPIN\Wisper Three LLC\Division-Corp.ltr.doc

ARTICLES OF ORGANIZATION OF WISPER THREE, LLC

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

ARTICLE I - Name:

The name of the Limited Liability Company is Wisper Three, LLC

ARTICLE II- Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

5660 NW 78th Avenue Miami, Florida 33166

ARTICLE III - Duration:

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

ARTICLE IV - Registered Agent:

The name and address of the Registered Agent for service of process in the state shall be:

Bruce F. Iden, Esq. Milledge & Iden 3240 Corporate Way Miramar, Florida 33025

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 a Registered Agent as provided for in Chapter 608 Florida Statutes.

Bruce F. Joen, Esq.

ARTICLE V - Manager or Managing Members

The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address:

Managing Member

Timothy D. Halpin Wisper Three, LLC 5660 NW 78th Avenue Miami, FL 33166

Managing Member

Nora A. Halpin Wisper Three, LLC 5660 NW 78th Avenue Miami, FL 33166

Bruce F. Iden, Esq. Authorized Signatory