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Withers Bergman w

February 19, 2004

Florida Department of State Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Re:

3-D Realty Co., LLC

Dear Corporate Representative:

The enclosed Articles of Organization for 3-D Realty Co., LLC are submitted for filing along with a check payable to the "Florida Department of State" in the amount of \$160 representing the following: \$100 for filing fee for the Articles of Organization; \$25 for the Designation of Registered Agent; \$30 for a Certified Copy; and \$5 for a Certificate of Status.

Please return all correspondence concerning this matter to the following:

Maria A. Wilson, Paralegal Withers Bergman, LLP 157 Church Street, 19th Floor New Haven, CT 06510 OH FEB 23 MINI: O

For further information concerning this matter, please call Maria A. Wilson, Paralegal, at 203-9780312.

Very truly yours, Muna all

Maria A. Wilson

Paralegal

MAW

Enclosures

direct: +1 203 974 0312

e-mail: maria.wilson@withers.us.com

157 Church Street

RO Box 426

New Haven, Connecticut 06502-0426

Telephone: +1 203 789 1320

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New York: +1 212 848 9800

Withersur

London: +44 (0)20 7597 6000

Milan: +39 02 2906601

www.withersworldwide.com

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: | | | | | | | |
|---|---|--|--|--|--|--|--|
| The name of the Limited Liability Company is: | | | | | | | |
| | | | | | | | |
| 3-D Realty Co., LLC | | | | | | | |
| ARTICLE II - Address: | | | | | | | |
| The mailing address and street address of the principal | office of the Limited Liability Company is: | | | | | | |
| Principal Office Address: | Mailing Address: | | | | | | |
| | | | | | | | |
| 57 St. Georges Place | 57 St. Georges Place | | | | | | |
| | | | | | | | |
| Palm Beach Gardens, FL 33418 | Palm Beach Gardens, FL 33418 | | | | | | |
| | | | | | | | |
| ADTICLE III - Penietored Agent Penietared Office & | Pagistored Agent's Signature | | | | | | |
| ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature: | | | | | | | |
| The name and the Florida street address of the registered agent are: | | | | | | | |
| | AFE 8 2 | | | | | | |
| Charles S. D'Angelo | | | | | | | |
| | 野里門 | | | | | | |
| 57 St. Georges Place | | | | | | | |
| Florida street address (P.O. Bo | »x <u>NOT</u> acceptable) 음류 글 | | | | | | |
| Balm Barah Cardana | FI ODIDA 22449 | | | | | | |
| Palm Beach Gardens. FLORIDA 33418 City, State and Zip | | | | | | | |
| | | | | | | | |

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.



| ARTICLE IV - Manager(s) or Managing Mer | mber(s): | |
|--|--|-----------|
| The name and address of each Manager or M | flanaging Member is as follows: | |
| <u>Title:</u> "MGR" = Manager "MGRM" - Managing Member | Name and Address: | |
| MGR | Charles S. D'Angelo | _ |
| | 57 St. Georges Place | |
| | Palm Beach Gardens, FL 33418 | |
| | | |
| | | _ |
| | | <u> </u> |
| (Use attachment if necessary) | | |
| NOTE: An additional article must be adde | d if an effective date is requested. | 무 |
| REQUIRED SIGNATURE: | LAHA | FEB 23 |
| x | SSE | <i>y</i> |
| Signature of a r | member or an authorized representative of a member | COF STATE |
| (In accordance with section 6 | 608.408(3), Florida Statutes, the execution | 超 0 |
| of this document constitutes | an affirmation under the penalties of perjury | P - |
| that the facts stated herein a | re true.) | |
| Cha | arles S. D'Angelo | |

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee or Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)