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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

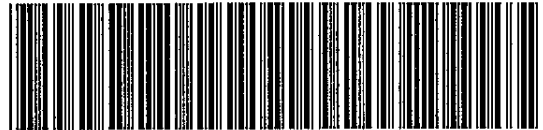
(Business Entity Name)

(Document Number)

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2004 MAY -6 AM 8:27
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

J. BRYAN MAY 18 2004

STEPHEN B. SANDERS
19546 SATURNIA LAKES DR.
BOCA RATON, FL 33498
TEL: 561-482-1443
CELL: 561-901-9759
FAX: 561-483-5805

To: Registration Section

From: Stephen Sanders

Division of Corporations

May 3, 2004

409 E. Gaines St.

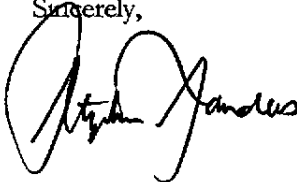
Tallahassee, FL 32399

(850) 245-6051

To whom it may concern:

Please find enclosed an application and check for the registration of a Florida L.L.C.

Sincerely,



Stephen B. Sanders

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2004 MAY -6 AM 8:28
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MIKO PROPERTIES C.L.C.
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

STEPHEN B. SANDERS
(Name of Person)

(Firm/Company)

19546 SATURNIA LAKES DR.
(Address)

BOCA RATON FL 33498
(City/State and Zip Code)

For further information concerning this matter, please call:

STEPHEN SANDERS at (561) 901 - 9759 cell. #
(Name of Person) (Area Code & Daytime Telephone Number)
OR 561 482 - 1443 home office #

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

FILED
2004 MAY -6 AM 8:28
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

FILED
2004 MAY -6 AM 8:28
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

MIKO PROPERTIES L.L.C.

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

19546 SATURNIA LAKES DR.

19546 SATURNIA LAKES DR.

BOCA RATON FL 33498

BOCA RATON FL 33498

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

STEPHEN B. SANDERS

Name

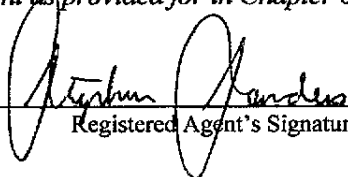
19546 SATURNIA LAKES DR.

Florida street address (P.O. Box **NOT** acceptable)

BOCA RATON FLORIDA 33498

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, Florida Statutes..



Registered Agent's Signature

ARTICLE IV- Manager(s) or Managing Member(s):

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

BEVERLY SANDERS
19546 SATURNIA LAKES DR.
BOCA RATON FL 33498

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:


Signature of a member or an authorized representative of a member.

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

BEVERLY SANDERS
Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

FILED
2004 MAY -6 AM 8: -
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA