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(Requestor's Name)	_
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PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	7
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CORPORATION SERVICE COMPANY.

	ACCOUNT	NO.	:	07210000003	2
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REFERENCE: 815694 4304766

AUTHORIZATION:

COST LIMIT : \$ 130.00

ORDER DATE : July 21, 2004

ORDER TIME: 8:35 AM

ORDER NO. : 815694-005

CUSTOMER NO: 4304766

CUSTOMER: Ms. Colleen Carignan

Burns & Levinson

125 Summer Street

Boston, MA 02110-1624

DOMESTIC FILING

NAME: 755 BROAD COURT NORTH LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

XX ___ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Heather Chapman - EXT. 2908

EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

TALLAHASSEE	7°, ~	1 (1) (1) (1)
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ART	ICLE	I - N	lame:
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The name of the Limited Liability Company is:

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ARTICLE II - Address:

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

Mailing Address:
c/o 755 Broad Court North LLC
853 Vanderbilt Beach Road, #342
Naples, FL 34108

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

ne
P.O. Box NOT acceptable)
EI ORIDA 32301

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..

Corporation Service Company

By: Deborah D. Skipper

Registered Agent's Signature

Deborah D. Skipper

Asst. V. Pres.

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGR	ERICO PETRILLO
	12 Stafford Road
	Lynnfield, MA 01940
MGR	EDWARD A. CEDERQUIST
	370 Rudder Road
	Naples, FL 34102
(Use attachment if necessary)	
,,	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	
Deborsh 10 x	lkippin
Signature of a member or an a	uthorized representative of a member.
	408(3), Florida Statutes, the execution ffirmation under the penalties of perjury
	Dehorah D. Skipper
By: Typed or pri	Asst V. Pres.
1300001 01	****

\$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)

LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of (the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

This Limited Power of Attorney is executed on this 21st day of July, 2004.

Signature

Erico Petrillo, Manager Print Name of Signer

Print Name of Witness

WITNESS: