

L04000055 228

(Requestor's Name)

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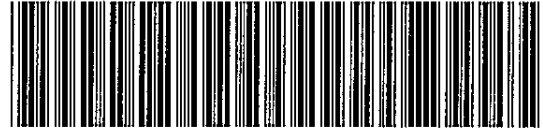
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CORPORATION SERVICE COMPANY

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ACCOUNT NO. : 072100000032

REFERENCE : 820293 83930A

AUTHORIZATION :

Patricia Pigato

COST LIMIT : \$ 155.00

ORDER DATE : July 26, 2004

ORDER TIME : 10:43 AM

ORDER NO. : 820293-005

CUSTOMER NO: 83930A

CUSTOMER: Ms. Anne Marie De Olden
Frazier Hotte & Associates, Pa

Suite 826
2400 East Commercial Boulevard
Ft. Lauderdale, FL 33308

DOMESTIC FILING

NAME: LJC III, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea - EXT. 2914

EXAMINER'S INITIALS: _____

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

ARTICLE I
NAME

The name of the Limited Liability Company is LJC III, LLC.

ARTICLE II
ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is 2618 Marion Drive, Fort Lauderdale, Florida 33316.

ARTICLE III
MANAGEMENT

The Limited Liability Company is to be managed by one or more of the members and the name and address of the initial managing member is: L. John Castelli, III, 2618 Marion Drive, Fort Lauderdale, Florida 33316.

ARTICLE III
EFFECTIVE DATE

The effective date of this Limited Liability Company is as of the filing of these Articles of Organization.

ARTICLE IV
REGISTERED AGENT, REGISTERED OFFICE
& REGISTERED AGENT'S SIGNATURE

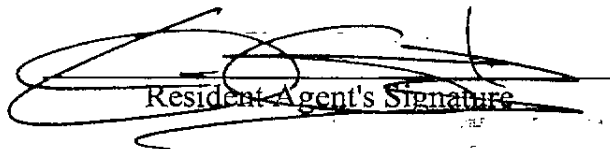
The name and the Florida street address of the registered agent are:

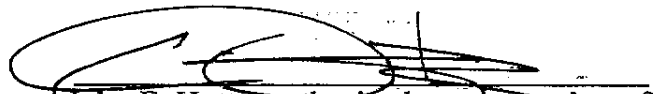
JOHN F. HOTTE, ESQ.
FRAZIER, HOTTE & ASSOCIATES, P.A.
2400 East Commercial Boulevard, Suite 826
Fort Lauderdale, Florida 33308

*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*

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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.


Resident Agent's Signature


John F. Hotte, authorized representative of
L. John Castelli, III, Managing Member

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

John F. Hotte, Esq., Authorized Representative
Typed or Printed name of Signee