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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

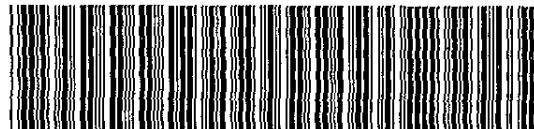
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Certified Copies _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9/24
[Signature]

MAY, MEACHAM & DAVELL

A PROFESSIONAL ASSOCIATION
ATTORNEYS AND COUNSELORS
SUITE 2602
ONE FINANCIAL PLAZA
FORT LAUDERDALE, FLORIDA 33394-1697

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FORT LAUDERDALE (954) 763-6006
MIAMI (305) 944-8291
TELEFAX (954) 764-5367

September 21, 2004

Via Federal Express

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

RE: Registration of a Florida Limited Liability Company

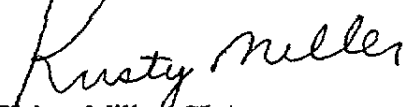
Gentlemen/Ladies:

Enclosed please find the **original** signed Articles of organization for Florida Limited Liability Company for RB & Family Properties, LLC and our firm's check for \$160.00 for filing fees.

Please return a certified copy of the Articles of Organization and a Certificate of Status to our offices.

Should you have any questions or comments, please call the undersigned.

Very truly yours,


Kristy Miller, CLA
Certified Legal Assistant
For the Firm

:klm
Enclosures

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TALLAHASSEE, FLORIDA

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

RB & FAMILY PROPERTIES, LLC

ARTICLE II - Address:

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

Principal Office Address:

5502 Monte Fino Court

Greenacres, Florida 33463

Mailing Address:

5502 Monte Fino Court

Greenacres, Florida 33463

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

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

William C. Davell, Esquire

Name

One Financial Plaza, #2602

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

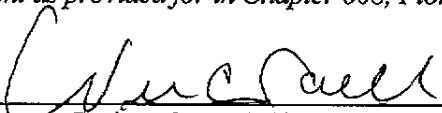
Fort Lauderdale

FLORIDA 33394

City, State, and Zip

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

MGR

RYAN J. CRITCH

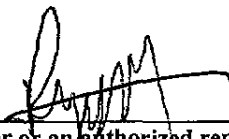
5502 Monte Fino Court

Greenacres, Florida 33463

(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.)

RYAN J. CRITCH

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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)