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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : WILLIAMS SCHIFINO ANGIONE & STEADY, P.A.
Account Number : I20000000216
Phone : (813) 221-2626
Fax Number : (813) 221-7335

LIMITED LIABILITY COMPANY

Berrojo & Rhoads, LLC

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**ARTICLES OF ORGANIZATION
OF
BERROJO & RHOADS, LLC**

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TALLAHASSEE, FLORIDA

A Florida Limited Liability Company

The undersigned, being authorized to execute and file these Articles of Organization, hereby certifies that:

ARTICLE I — Name:

The name of the limited liability company (hereinafter referred to as the "Company") is:

BERROJO & RHOADS, LLC

ARTICLE II — Address:

The mailing and street address of the Company is:

442 West Kennedy Boulevard
Suite 200
Tampa, Florida 33606

ARTICLE III — Registered Agent:

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

Williams Schifino Mangione & Steady, P.A.
One Tampa City Center
Suite 2600
Tampa, Florida 33602

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ARTICLE IV — Management:

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The Company is to be managed by a manager or managers and is, therefore, a manager managed limited liability company.

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ARTICLE V — Limitation on Agency Authority of Members:

Pursuant to section 608.4235 of the Florida Limited Company Act, no member of the Company shall be an agent of the Company solely by virtue of being a member.

[Signature Pages Follow.]

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IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 27th day of September 2004.

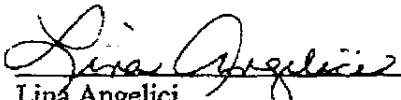
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TALLAHASSEE, FLORIDA


Lina Angelici, Authorized Representative

In accordance with Section 608.408(3), Florida Statutes, the execution of these Articles of Organization constitutes an affirmation, under the penalties of perjury, that the facts stated herein are true.

Dated: September 27, 2004


Lina Angelici

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STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Williams Schifino Mangione & Steady, P.A., do hereby accept the designation as registered agent to accept service of process for BERROJO & RHOADS, LLC, at the place designated in this statement below. 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 under Chapter 608, Florida Statutes.

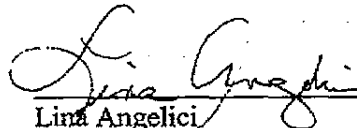
IN WITNESS WHEREOF, I have signed this Statement Accepting Appointment as Registered Agent this 27th day of September 2004.



Lina Angelici, Esq., On behalf of the Firm
Williams Schifino Mangione & Steady, P.A.
Registered Agent
One Tampa City Center, Suite 2600
Tampa, Florida 33602

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

Dated: September 27, 2004



Lina Angelici

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