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Goldstein, Levy & Helmer, PA

October 26, 2004

Registration Section Divisions of Corporations PO Box 6327 Tallahassee, FL 32314

Re: ST. PETE, LLC

We are enclosing a check in the amount of \$125 as filing fees for the Florida Limited Liability Company. The Transmittal Letters and Articles of Organization are filled out and signed.

All correspondence should be through our office. Thank you.

Sincerely,

Barbara P. Schwartz

Barbara P. Schwartz

SECRETARY OF STATE

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	 .
SUBJECT: St. Pete	LLC
(Name of Limited	Liability Company)
The enclosed Articles of Organization and fee(s) are su	bmitted for filing.
Please return all correspondence concerning this matter	to the following:
Barbara Sch	ame of Person)
Arnord S. goldste	in + Associates
2500 N. Milita	My Trail #260 (Address)
Boca Raton (City/s	Ftate and Zip Code)
For further information concerning this matter, please of	eall:
Berbara Shwartz	at 561 953-1050
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\ \text{Certificate of Status}	S155.00 Filing Fee & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
STREET ADDRESS: Registration Section	MAILING ADDRESS: Registration Section
Division of Corporations	Division of Corporations
409 E. Gaines Street Tallahassee, Florida 32399	P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
St. Pete, 1	_LC
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
	2298 NW 60th Sheet
	Boca Raton FL 33496
ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:
The name and the Florida street address of the re	egistered agent are:
Charles	Mandell Es = -
2798 NW Florida street add	60th Street 3 3 7 ress (P.O. Box NOT acceptable) 3
Boca Rator City, State, a	FL 33496 7 7
	95 %

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, F.S.

Charles Mandell

Registered Agent's Signature

(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" = Manage					
MGRM	-	Charles M 2298 NW 60 Boca Raton F	andell th sheet -L 33496		
MGRM		Jane Manda 2298 NW 6 Boca Raton Fo	eil oth street 33496		
	-				
	-				
(Use attachment if	necessary)		7AS 22		
NOTE: An additi	onal article must be a	added if an effective date is	requested		
REQUIRED SIGN	NATURE:		7 29 7 29 7 29		
Ī	Charles ignature of a member or	an authorized representative of	a members		
C	In accordance with section	608.408(3), Florida Statutes, the san affirmation under the penaltie	execution		
	Charles	Mandell or printed name of signee			

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)