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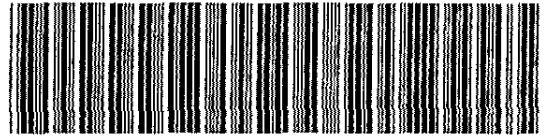
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ROLNICK & NETBURN
ATTORNEYS AT LAW
A PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS
9734 WEST SAMPLE ROAD
CORAL SPRINGS, FLORIDA 33065

HERBERT H. ROLNICK, P.A.
DAVID A. NETBURN, P.A.
DENISE A. WELTER, Esq.

TEL: (954) 346-5001
FAX: (954) 346-5006

December 3, 2004

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: 4GFI, LLC

Gentlemen:

Enclosed herewith please find an original and one copy of the Articles of Organization For Florida Limited Liability Company. Please file the original and return a "filed" copy to our office in the enclosed, self-addressed, stamped envelope. Also enclosed is a check in the sum of \$125.00 to cover the cost of the filing fee.

Should you have any questions, please do not hesitate to contact our office collect.

Very truly yours,

ROLNICK & NETBURN

BY 

DAVID A. NETBURN, ESQ.

Encs.
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Via First Class U.S. Mail

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TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 4GFI, LLC

(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

David A. Netburn, Esq.

(Name of Person)

Rolnick & Netburn

(Firm/Company)

9734 West Sample Road

(Address)

Coral Springs, Florida 33065

(City/State and Zip Code)

For further information concerning this matter, please call:

David A. Netburn, Esq.

(Name of Person)

at (954) 346-5001

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|---|---|---|---|

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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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:

4GFI, LLC

ARTICLE II - Address:

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

Principal Office Address:

6909 Cobia Circle
Boynton Beach, FL 33437

Mailing Address:

6909 Cobia Circle
Boynton Beach, FL 33437

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

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

MARK GAYLINN

Name

6909 COBIA CIRCLE

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

BOYNTON BEACH, FL 33437 FL

City, State, and Zip

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..


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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Mark Gaylinn

6909 Cobia Circle

Boynton Beach, FL 33437

(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.)

MARK GAYLINN

Typed 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)**

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CLAIMS SECTION