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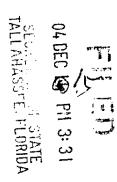
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REFERENCE: 085703 7384056

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE: December 15, 2004

ORDER TIME : 11:37 AM

ORDER NO. : 085703-005

CUSTOMER NO: 7384056

CUSTOMER: Richard T. Morehead, Esq.

Richard T. Morehead, P.a.

444 Third Street

Neptune Beach, FL 32266

DOMESTIC FILING

NAME: P FLAMINGO, LLC

EFFECTIVE DATE:

XX _ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX ___ PLAIN STAMPED COPY

CONTACT PERSON: Justin Cheshire - EXT. 2909

EXAMINER'S INITIALS:

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICL	\mathbf{E} \mathbf{I}	$-N_2$	ıme:
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The name of the Limited Liability Company is:

₽	Flamingo	٠,	LI	'nC
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ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
147 South Roscoe Blvd.	147 South Roscoe Blvd.
Ponte Vedra Beach	Ponte Vedra Beach
Florida 32082	Florida 32082

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

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

Neil G. Bonom		
Name		
147 South Roscoe Blvd.		
Florida street address (P.O. Box NOT acceptable)		
Ponte Vedra Beach, FLORIDA	32082	
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 1998, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (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" = Managing Member	
MGRM	Neil G. Bonom
	147 South Roscoe Blvd.
	Ponte Vedra Beach, FL 32082
MGRM	Maryanne B. Bonom
	147 South Roscoe Blvd.
	Ponte Vedra Beach, FL 32082
MGRM	Miles H. Bonom
	34 Fara Drive
	Stamford, CT 06905
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
DESCRIPTION OF STATE OF	<i>f</i>
REQUIRED SIGNATURE:	
Med Thou	
Signature of a member of an au	thorized representative of a member.
(In accordance with section 608.4	408(3), Florida Statutes, the execution ffirmation under the penalties of perjury
that the facts stated herein are tru	
Neil G. Bonom	•
	nted name of signee

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)