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Law Office Of Garth J. Milazzo

37 North Orange Avenue Suite 500 Orlando, Florida 32801

Mailing Address: Post Office Box 1888 Orlando, Florida 32802 Phone (407) 926-4016 Fax (407) 926-4017 www.MilazzoLaw.com

December 30, 2004

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Re:

Filing of New Limited Liability Company

Name:

Triumvirate Group, L.L.C.

Dear Sir or Madam:

Enclosed please find the following for filing:

- 1. Check in the amount of \$160.00 for filing fee, certificate of status and certified copy (additional copy is enclosed);
- Original and one (1) copy of the Articles of Organization for Florida Limited Liability Company of TRIMVIRATE GROUP, L.L.C.; and
- 3. Self-addressed, stamped envelope for return of certified status and Articles.

Please file the enclosed and return the certified copies to this office in the provided envelope.

Please do not hesitate to contact this office if you have any questions concerning the enclosed or require additional information.

Very/truly yours,

Garth J. Milazzo, Esquire

GJM/mm

Encls.

Articles of Organization (original and copy)

Check in the amount of \$160.00 Self-addressed, stamped envelope

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIBILITY COMPANY FOR TRIUMVIRATE GROUP, L.L.C.

ARTICLE I

The name of the Limited Liability Company is TRIUMVIRATE GROUP, L.L.C.

ARTICLE II

The principal office address is:

The mailing address is:

Triumvirate Group, L.L.C. 100 Candance Drive, Suite 112 Maitland, Florida 32751 Triumvirate Group, L.L.C. Post Office Box 151222 Altamonte Springs, Florida 32715

ARTICLE III

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

Garth J. Milazzo, Esquire 37 North Orange Avenue, Suite 500 Orlando, Florida 32801

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

ARTICLE IV

The name and address of each Manager or Managing Member is as follows:

000

5.0

Title:

Name and Address:

MGR

Daniel J. Komar 100 Candance Drive, Suite 112 Maitland, Florida 32751

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.

Garth J. Milazza, Esquite)

Authorized Representative of Daniel J. Komar, Member