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Account Number : 076077000521 Phone : (954)527-2428 Fax Number : (954)764-4996

JF CORPORATI

LIMITED LIABILITY COMPANY

PWMF LLC

Cartificate of Status	1
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ARTICLES OF ORGANIZATION OF PWMF LLC 4 Florida Limited Liability Company

SECRETARY OF STATE TALLAHASSEE, FLORIDA

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

- 1. <u>NAME</u>. The name of the Limited Liability Company is PWMF LLC (the "Company").
- 2. MAILING AND STRUCT ADDRESS OF PRINCIPAL OFFICE. The mailing and street address of the principal office of the Company is: 6971 N. Federal Highway, Boca Raton, Florida 33487.
- 3. <u>REGISTITED AGENT.</u> The name and address of the initial registered agent in the State of Florida, whose Consent to Appointment as Registered Agent accompanies these Articles of Organization, is: Sidney Adler, 6971 N. Federal Highway, Boca Raton, Florida 33487.

The undersigned has executed these Articles of Organization on the 25 day of January, 2005.

Sidney Adler, Authorized Person

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Jan-27-2005 02:13pm From-RUDEN McCLOSKY 17F_N

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CERTIFICATION OF DESIGNATION OF FEGISTERED AGENT/REGISTERED OFFICE

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SECRETARY OF STATE PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATE PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATEMENT UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA

- 1. The name of the limited liability company is: PWMF LLC.
- 2. The name and address of the registered agent and office is:

Sidney Adler 6971 N. Federal Highway Boca Raton, Florida 33487

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 its 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.

Side y Adler, Registered Agent

Date: