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TRANSMITTAL LETTER

FILED

TO: Registration Section	LILED
Division of Corporations	15 (AM D) - A
	ORFTARY OF STATE AHASSEE, FLORIDA
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Barbara P. Schwartz	
Arnold S. goldstein + Associ	ates
2500 N. Military Trail # &	160
Boca Raton FL 3343 (City/State and Zip Code)	j
For further information concerning this matter, please call:	
Bailbard P. Schulatt at (SG1) 953-109 (Name of Person) (Area Code & Daytime Telephone N	SO umber)
Epclosed is a check for the following amount:	
Certificate of Status Certified Copy Certific (additional copy is enclosed) Certific	0.00 Filing Fee, cate of Status & led Copy nal 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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ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

RETSEY L. CHESLER

Name

23431 KATER CIRCLE

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

Boca RATON, FL 33486

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..

egistered 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: FILED Title: Name and Address: "MGR" = Manager 2005 JAN 24 A 1: 54 "MGRM" = Managing Member MGRM (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.)

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)