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ACCOUNT NO. : 072100000032

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AUTHORIZATION : Totricia 1	The Est of I	
COST LIMIT : \$ 125.00)
ORDER DATE : February 3, 2005	757 7. 12	
ORDER_TIME : 2:26 PM	<u> </u>	
ORDER NO. : 183337-005	· · · · · · · · · · · · · · · · · · ·	
CUSTOMER NO: 7471730		
CUSTOMER: Faye L. Hopkins Faye L. Hopkins		
29 Fowwood Circle	· · · · · · · · · · · · · · · · · · ·	
Mount Kisco, NY 10549		
DOMESTIC FILLING		251
NAME: BLAKELY MADISON LLC		
EFFECTIVE DATE:		
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX -ARTICLES OF ORGANIZATION		
PLEASE RETURN THE FOLLOWING AS PROOF OF FILE	NG:	
CERTIFIED COPY XX PLAIN STAMPED COPY		
CERTIFICATE OF GOOD STANDING		
CONTACT PERSON: Susie Knight - EXT. 2956 EXAMINER'S INI	TIALS	

ARTICLES OF ORGANIZATION — FOR FLORIDA LIMITED LIABILITY COMPANY

A	RTICL	E	ĭ	- Name:	

29 FOXWOOD CIRCLE

The name of the Limited Liability Company is:

ARTICLE II - Address: The mailing address and street a	ddress of the principal	office of the Limited Liability Company is
Principal Office Address:		Mailing Address:
C/O FAYE I. HOPKINS		C/O FAYE L HOPKINS
29 FORWOOD CIRCLE		29 FOXWOOD CIRCLE

MOUNT KISCO, NEW YORK 10549 MOUNT KISCO, NEW YORK 10549

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

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

BLAKELY MADISON TLC

Corporation Service Company Name

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

Tallahassee 32301 FLORIDA 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, Florida Statutes..

Corporation Service Comp

By:

Registered Apart's Signature

Stanley R. Howie, Jr. Assistant Secretary

Page 1 of 2 (CONTINUED)

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGRM	Faye L. Hopkins
•	29 Foxwood Circle
	Mount Kisco, New York 10549
MGR	Coorga D. Hawkins
	George B. Hopkins
	5 Bakley Terrace
	West Orange, New Jersey 07052
MGR	Donnell L. Hopkins
	8505 Kennestone Lane
— <u> </u>	North Charleston, South Carolina
(Use attachment if necessary)	
NOTE: An additional article must	be added if an effective date is requested.
	be added if an effective date is requested.
NOTE: An additional article must REQUIRED SIGNATURE:	Arthens -
NOTE: An additional article must REQUIRED SIGNATURE: Signature of a member or a	n switherized representative of a member. 508.408(3), Florida Statutes, the execution an affirmation under the penalties of periury
NOTE: An additional article must REQUIRED SIGNATURE: Signature of a member or as (In accordance with section of this document constitutes a that the facts stated herein are	n sutherized representative of a member. 508.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury e true.)
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