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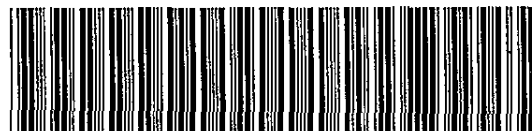
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BRADLEY W. HOGREVE, P.A.

ATTORNEY AT LAW
A PROFESSIONAL ASSOCIATION

100 Wallace Avenue, Suite 310
Sarasota, Florida 34237-6043

BRADLEY W. HOGREVE
Board Certified Real Estate Attorney

Telephone (941) 951-7700
Facsimile (941) 951-7789

www.sarasota-attorney.com

February 9, 2005

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

VIA FEDERAL EXPRESS

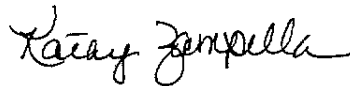
Re: EGARIAN ENTERPRISES, LLC.

Dear Sir/Madam:

Enclosed you will find an original and a copy of Articles of Organization for the above referenced limited liability company. I am also enclosing a check in the amount of \$125.00 as the filing fee. Please return a conformed copy to our office in the enclosed envelope.

If you have any questions, please do not hesitate to call me.

Sincerely,



Kathy Zampella
Legal Assistant

klz
Enclosures

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: **EGARIAN ENTERPRISES, LLC.**

ARTICLE II - Address:

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

Principal Office Address:

2 Sylvan Way, Suite 303 West
Parsippany, NJ 07054

Mailing Address:

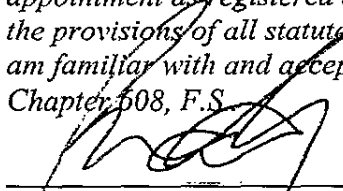
2 Sylvan Way, Suite 303 West
Parsippany, NJ 07054

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

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

Bradley W. Hogreve
100 Wallace Avenue, Suite 310
Sarasota, FL 34237

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 508, F.S.


Bradley W. Hogreve, Registered Agent

ARTICLE IV - Manager(s) or Managing Member(s):

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

Title:

MGRM

Name and Address:

David J. Egarian
2 Sylvan Way, Suite 303 West
Parsippany, NJ 07054

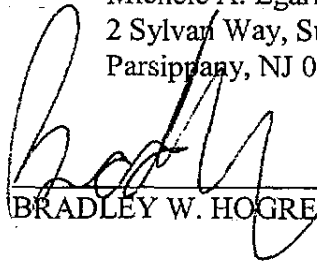
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TALLAHASSEE, FLORIDA

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MGRM

Michele A. Egarian
2 Sylvan Way, Suite 303 West
Parsippany, NJ 08054



BRADLEY W. HOGREVE, authorized representative

(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.)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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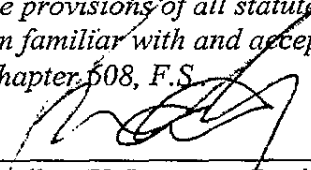
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Bradley W. Hogreve, Registered Agent

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MGRM

Name and Address:

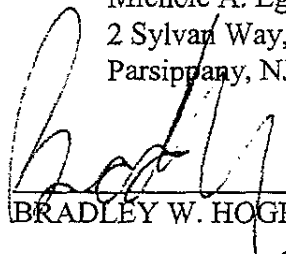
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TALLAHASSEE, FLORIDA

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MGRM

Michele A. Egarian
2 Sylvan Way, Suite 303 West
Parsippany, NJ 08054



BRADLEY W. HOGREVE, authorized representative

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