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Office Use Only

TRANSMITTAL LETTER

	ation Section n of Corporations	FILED
SUBJECT:	WAMU Partners One, L.L.C.	
The enclosed A	(Name of Limited Liability Company) ticles of Organization and fee(s) are submitted for filing.	SECRETARY OF STATE TALLAHASSEE, FLORIDA
Please return all	correspondence concerning this matter to the following:	
	Jonas S. Nordal (Name of Person)	
	WAMU Partners One, L.L.C. c/o JM Properties of South Florida (Firm/Company)	. Inc.
	3201 North Federal Highway, Suite (Address)	300
	Fort Lauderdale, Florida 33306 (City/State and Zip Code)	1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-
For further infor	mation concerning this matter, please call:	
-,,	Jonas S. Nordal at (954) 56 (Name of Person) (Area Code & Dayti	5-5999 me Telephone Number)
Enclosed is a c	heck for the following amount:	
\$125.00 Filir	ng Fee	Certificate of Status &
	Registration SectionRegistratDivision of CorporationsDivision409 E. Gaines StreetP.O. Box	NG ADDRESS: tion Section of Corporations tions tions tions tions tions tions tions tions

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	2005 MAR 14 P 3: 44 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
WAMU Partners One, L.L.C.		
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
3201 North Federal Highway Suite 300 Fort Lauderdale, FL 33306	3201 North Federal Highway Suite 300 Fort Lauderdale, FL 33306	
ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:	
The name and the Florida street address of the re	egistered agent are:	
Jonas S. Nordal		
Name		
3201 North Federa	l Highway, Suite 300	
Florida street add	ress (P.O. Box <u>NOT</u> acceptable)	
<u>Fort Lauderdale</u> City, State, a	FL 33306 nd Zip	
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	inccept service of process for the above stated limited this certificate, I hereby accept the appointment as in. I further agree to comply with the provisions of all informance of my duties, and I am familiar with and interest agent as provided for in Chapter 608, F.S	
Jonas S. No	ordal	

(CONTINUED)

Page 1 of 2

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

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

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	FILED
MGRM	Jonas S. Nordal 3201 North Federal Fort Lauderdale, Fl	2005 MAR 14 P 3: 44 Hwy, #300, of STATE LTABBOGASSEE. FLORIDA
MGRM	Mark L. Sager 3201 North Federal Fort Lauderdale, Fl	
(Use attachment if necessary)		
NOTE: An additional article	must be added if an effective date is	requested.
REQUIRED SIGNATURE:	Blild	
	nember or an authorized representative of a	
of this document	vith section 608.408(3), Florida Statutes, the extension under the penalties tated herein are true.)	recution of perjury
	S. Nordal 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)