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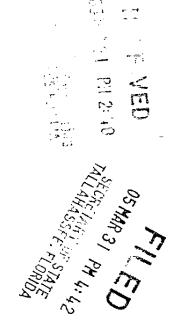
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CORPORATE			\$ 125,00	
ACCESS, 236 East 6th Avenue . Tallahassee, Florida 32303 INC. P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax 2850) 222-1666				
CERTIFIED COPY	WALE PICK UP 3	_	APCOMA TO A LOCAL TO A	
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1.) LOWY COL (CORPORATE NAME & DOCUMENT #)	C. Sigmo	in, UC		
2.)(CORPORATE NAME & DOCUMENT #)				
3.)(CORPORATE NAME & DOCUMENT #)				
4.)(CORPORATE NAME & DOCUMENT #)				
5.)(CORPORATE NAME & DOCUMENT #)	· · · · · · · · · · · · · · · · · · ·			
SPECIAL INSTRUCTIONS				

ARTICLE I - Name: The name of the Limited Liability Company is: LAWRENCE C. SIGMAN, LLC ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is 10920 Lakemore Lane, Apt 202 Boca Raton, FL 33498 ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

Lawrence C. Sigman

Name

10920 Lakemore Lane, Apt. 202

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

Boca Raton, FL 33498

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..

James C. Sigman

Article IV - Management (Check box if applicable.)

X The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

arren Culinoan

(An additional article must be added if an effective date is requested)

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.)

Lawrence C. Sigman

Typed or printed name of signee:

FILING FEES:

\$ 100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (OPTIONAL) \$ 5.00 Certificate of Status (OPTIONAL)