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T. Brumbley APR 1 2005

TRANSMITTAL LETTER

Department of State Division of Corporations P O Box 6327 Tallahassee, FI 32314

SUBJECT:	MARCIA ALCI BATUR, LLC
	(PROPOSED CORPORATE NAME)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

FILING FEES:

\$100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent

Total Fee \$125.00

FROM:

MARCIA ALCI BATUR

Name(Printed or typed)

12032 N W 13TH STREET

Address

PEMBROKE PINES, FL 33026

City, State & Zip

(954) 450-0562

Daytime Telephone Number

OS MAR 30 AM II: 27

ARTICLES OF LIMITED LIABILITY COMPANY MARCIA ALCI BATUR, LLC

ARTICLE I - NAME:

The name of the Limited Liability Company is: MARCIA ALCI BATUR, LLC

ARTICLE II - ADDRESS:

The mailing address and the street address of the principal office of the limited liability company is:

MARCIA ALCI BATUR, LLC 12032 N W 13TH STREET PEMBROKE PINES, FL 33026

ARTICLE III - REGISTERED	AGENT, REGISTERED	OFFICE, &	REGISTERED
AGENT'S SIGNATURE:	•		25

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

MARCIA ALCI BATUR Name 12032 N W 13TH STREET Florida Street Address PEMBROKE PINES, FL 33026 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.

ARTICLE IV - MANAGEMENT:

MANAGER MEMBER

MARCIA ALCI BATUR

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

Signature of a member or an authorized representative of a member.

MARCIA ALCI BATUR

Name of Signee