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(Re	questor's Name)	
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ACCOUNT NO. : 072100000032 REFERENCE : AUTHORIZATION : COST LIMIT : \$ 125.00 ORDER DATE: May 10, 2005 ORDER TIME: 11:08 AM ORDER NO. : 364220-005 CUSTOMER NO: 86218A CUSTOMER: Paul Gregory, Esq Mandelbaum Salsburg Gold Lazris Discenza & Steinberg P 155 Prospect Avenue West Orange, NJ 07052 DOMESTIC FILING NAME: 2S3K, LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Amanda Haddan - EXT. 2955 EXAMINER'S INITIALS:

FL

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY	ALE THE PARTY OF T		
ARTICLE I - Name: The name of the Limited Liability Company is:			
2S3K, LLC	Option of		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited	Liability Company is:		

ARTICLE II - Address:

Principal Office Address: Mailing Address:			
2252 Las Casitas Drive	2252 Las Casitas Drive		
Wellington, Florida 33414	Wellington, Florida 33414		

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

> Carleton E. Saunders III Name 2252 Las Casitas Drive Florida street address (P.O. Box NOT acceptable)

Wellington FLORIDA 33414 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..

> By: Registered Agent's Signature

> > Page 1 of 2 (CONTINUED)

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:		
MGRM	Carleton E. Saunders III		* * *.
	2252 Las Casitas Drive	, HX ,	
j	Wellington, Florida 33414		<u>gs</u>
MGRM	Hal Kaimine		
	2893 Winding Oak Lane	 _	
	Wellington, Florida 33414		
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(Use attachment if necessary)			
NOTE: An additional article must be ac	lded if an effective date is reque	sted.	
REQUIRED SIGNATURE:			· · · · · · · · · · · · · · · · · · ·
Cumpehin	mana	5.,	ALCOHOL STATE
Signature of a member or an auth	orized representative of a member.		
(In accordance with section 608.40	8(3), Florida Statutes, the execution rmation under the penalties of perjury		
By:Carleton E. Saunders	iii :	,	- 7
	d name of signee	•	1

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)