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(Address)

(Address)

(City/State/Zip/Phone #)

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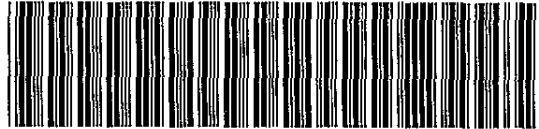
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9/15/05
[Signature]

Lazan, Trute & Robbins

A PARTNERSHIP INCLUDING PROFESSIONAL ASSOCIATIONS

ATTORNEYS AND COUNSELLORS AT LAW

SUITE 202 • 1090 KANE CONCOURSE

Bay Harbor Island, Florida 33154

DAVID MICHAEL LAZAN
MELVYN TRUTE
MARJORIE F. ROBBINS

POST OFFICE BOX 6260
Surfside, Florida 33154

DADE (305) 865 - 6736
BROWARD (954) 763 - 8499
TELECOPIER (305) 865 - 6756

September 6, 2005

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Articles of Organization for
Regency Capital Properties, LLC

Ladies and Gentlemen:

Enclosed herewith for filing, please find Articles of
Organization for Regency Capital Properties, LLC in duplicate.

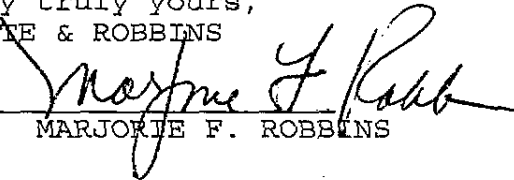
Also enclosed is our check, payable to the order of the Florida
Department of State, in the amount of \$160.00, representing
filing fee of \$100.00, Designation of Resident Agent fee of \$25.00,
amount of \$25.00, \$30.00 for certified copy, and \$5.00 for
Certificate of Status.

Please return to the undersigned one certified copy of the
Articles of Organization, together with a Certificate of Status.

Should you have any questions, please contact the undersigned.
Thank you for your prompt attention to this matter.

Very truly yours,
TRUTE & ROBBINS

BY:


MARJORIE F. ROBBINS

MFR/hh
Enclosure

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STATE

ARTICLES OF ORGANIZATION
FOR REGENCY CAPITAL PROPERTIES, LLC

ARTICLE I-NAME:

The name of the Limited Liability Company is:
REGENCY CAPITAL PROPERTIES, LLC

ARTICLE II-ADDRESS:

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

18181 N.E. 31st Court, #110
Aventura, Fl. 33160

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

The name and the Florida street address of the Registered Agent is:

MARJORIE F. ROBBINS, ESQ.
1090 Kane Concourse/Suite 202
Bay Harbor Islands, Fl. 33154

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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.


(Registered Agent's Signature)

ARTICLE IV-MANAGEMENT

The Limited liability Company shall be a member-managed company.

By: Barbara Stone
BARBARA STONE/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.)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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