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DIVISION OF CORPORATIONS

N. Culligan NOV 1 6 2005

COVER LETTER

TO:

Registration Section

Division of Corporations					
SUBJECT: The Palm Beach Way, LLC (Name of Limited Liability Company)					
The enclosed Articles of Organization and fee(s) are submitted for filing.					
Please return all correspo	ondence concerning this matter	to the following:			
Tima	thy Cascin	Name of Person)			
The	Palm Be	ach was	-		
332	Marroe !	Sher #	4		
Hob	oken, no	(Address)	30		
	/ (City/	State and Zip Code)			
For further information c	oncerning this matter, please c	all:			
For further information concerning this matter, please call: Timothy (ascino at 23 2560 (Name of Person) (Area Code & Daytime Telephone Number)					
Enclosed is a check for the following amount:					
□ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center (Tallahassee, FL 32301	s		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
(Must end with the words "Limited Liability Company, "Limited Company" be their abbreviation "LLC," or "L.C.,")		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Co	mpar	ny is:
Principal Office Address: Mailing Address:		
50 Cocoanut Row Clo T. Cascino Palm Beach, Florida 1332 Monroe St Hospiken, 195	<u>-</u> # -67	4 03
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signatu (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or anoth business entity with an active Florida registration.)		
The name and the Florida street address of the registered agent are: Britte M. Britto Name 50 Cocanut Row Florida street address (P.O. Box NOT acceptable) Plan Black FL 33480 City, State, and Zip	05 NOV -8 AM 11: 38	SECRETARY OF STATE DIVISION OF CORPORATIONS

(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:	
mol-	Brighte M. Britton 50 Coconut Row Palm Beach, Fl. 33	<u>78</u> 0
Wer	Dr. layre D. Mises 50 GCONST FOW RAIM BEECK, FI. 3	<u>5000000000000000000000000000000000000</u>
MGA.	Timothy (ascing 332 marror sr. #4 Hoboken, no ogo	2
		_
(Use attachment if necessary) ARTICLE V: Effective date, if other than (If an effective date is listed, the date is prior to or 90 days after the date of filing	nust be specific and cannot be more than five	PTIONAL) business day
REQUIRED SIGNATURE:	the Cascino	SECRETARY DIVISION OF CO
(In accordance wit of this document of	th section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury ted herein are true.) Ascarro Typed or printed name of signee	OF STATE RPORATIONS

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)