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Division of Corporations

Fax Number

: (850)205-0383

From:

: NASON, YEAGER, GERSON, WHITE & LICCE, P.A. .Account Name

Account Number: 073222003555 Phone : (561)686-3307 Fax Number : (561)686-5442

FLORIDA/FOREIGN LIMITED LIABILITY CO.

FFHI, LLC

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ARTICLES OF ORGANIZATION

OF

FFHI, LLC

2006 JAN -9 A 8: 04 SECRETARY OF STATE TALLAHASSEE, FLORIDA

I, the undersigned authorized representative of the Members, hereby make, acknowledge and file these Articles of Organization for the purpose of forming a limited liability company under the laws of the State of Florida.

ARTICLE I NAME

The name of this Limited Liability Company is:

FFHI, LLC

<u>ARTICLE II</u> <u>ADDRESS</u>

The street address and mailing address of the principal office is:

1951 N.W. 19th Street Suite 200 Boca Raton, FL 33431

ARTICLE III DURATION

The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE IV MANAGEMENT

The powers of the Limited Liability Company shall be exercised by or under the authority of, and the business and affairs of the Limited Liability Company shall be managed under the direction of its Member and is, therefore, a member-managed company.

ARTICLE V

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ADMISSION OF ADDITIONAL MEMBERS

The Members shall have the right to admit additional members.

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SECRETARY OF STATE TALLAHASSEE, FLORIDA IN WITNESS WHEREOF, the undersigned authorized representative of the Members has made and subscribed these Articles of Organization at West Palm Beach, Florida, for the uses and purposes aforesaid, this 9th day of January, 2006.

Gary N. Gerson, Authorized Representative of the

Members

. . .

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATEUTES. 8: 04
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENTUMSTATE
THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

FFHI, LLC

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

Gary N. Gerson 1645 Palm Beach Lakes Blvd. Suite 1200 West Palm Beach, Florida 33401

Having been named as registered agent to accept service of process for the above-stated limited liability company, at the location designated herein, I hereby consent to and accept the appointment to act in this capacity, acknowledge that I am familiar with and accept the obligations of a registered agent and agree to comply with the laws of Florida applicable thereto.

Gary N. Gerson, Registered Agent