

LD60000033783

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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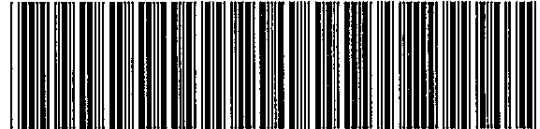
(Business Entity Name)

(Document Number)

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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 954056 8739A

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE : March 30, 2006

ORDER TIME : 3:57 PM

ORDER NO. : 954056-005

CUSTOMER NO: 8739A

DOMESTIC FILING

NAME: BUFFALO X, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan - EXT. 2955

EXAMINER'S INITIALS: _____

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Please give 3/30/06 file date.

**ARTICLES OF ORGANIZATION
OF
BUFFALO X, LLC**

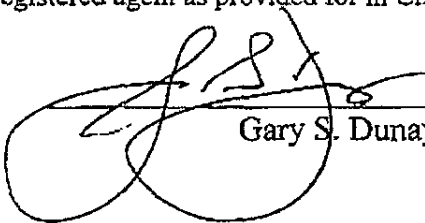
Article I - Name: The name of the Limited Liability Company is Buffalo X, LLC.

Article II - Address: The mailing address and street address of the principal office of the Limited Liability Company are 2799 NW Boca Raton Blvd., Suite 203, Boca Raton, Florida 33431.

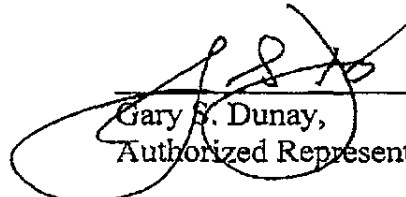
Article III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

Gary S. Dunay
5355 Town Center Road #801
Boca Raton, Florida 33486

Having been named as registered agent and to accept service of process of 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.



Gary S. Dunay



Gary S. Dunay,
Authorized Representative

(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.)

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