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COVER LETTER

TO: Registration Sec Division of Cor			
SUBJECT: Pomp	Sano Beach (Name of Limite	Eguity Pard Liability Company)	rtners, LLC
The enclosed Articles of	Organization and fee(s) are so	ubmitted for filing.	
Please return all correspo	ondence concerning this matte	r to the following:	
	KEN D	AWSON	
	(1	Name of Person)	
	DAWSO	ON LAW.	P.A
		Firm/Company)	
	3955 U	Jild Pine L. (Address)	ane
		(Address)	
	Merritt	Island, F	L 32952
_	(City	/State and Zip Code)	
For further information of	concerning this matter, please	call:	
. / ~			- 23 2 2
(Name of Person) at (321) 544 - 3333		Celephone Number)	
Enclosed is a check for	r 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	ons r Circle

ARTICLES OF ORGANIZATION OF POMPANO BEACH EQUITY PARTNERS, LLC

In compliance with Chapter 608, F.S.

ARTICLE I - NAME

منسادي آه

The name of this Florida Limited Liability Company shall be POMPANO BEACH EQUITY PARTNERS, LLC and shall exist perpetually.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing address shall be 2803 NE 15TH Street, Pompano Beach, Florida 33062

ARTICLE III - REGISTERED AGENT

The name and address of the initial Registered Agent is;

Ken Dawson - 888 S. Andrews Avenue, Suite 204, Ft. Lauderdale, FL 33316.

Having been named as registered agent to accept service of process for the above stated limited liability company at the place designated in this certificate, I am familiar with and 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.

Ken Dawson/Registered Agent

6-30.06

Date

<u>ARTICLE IV – MANAGERS OR MANAGING MEMBERS</u>

The name and address of each manager or managing member is as follows:

SECRETARY OF STATE

TITLE

NAME & ADDRESS

MGR

Neil E. Bonoff 2803 NE 15TH Street Pompano Beach, Florida 33062

ARTICLE V - EFFECTIVE DATE

The effective date of this limited liability company shall be the date of filing.

REQUIRED SIGNATURE:

Signature of Member NEIL E. BONOFF

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.

NEIL E. BONOFF

Typed or printed name of signee

SECRETARY OF STATE

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