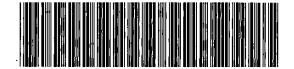
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O6 AUG 31 PM 3: 30 SECRETARY OF STATE 750 W. Lake Cook Road, Suite 350 Buffalo Grove, Illinois 60089 TEL: 847. 537. 0500 FAX: 847. 537. 0550 WEB: www.ksnlaw.com KOVITZ SHIFRIN NESBIT

A Professional Corporation

July 28, 2006

134 North LaSalle Street, Suite 1600 Chicago, Illinois 60602

TEL: 312, 372, 3227 FAX: 312, 372, 4646

1220 Iroquois Avenue, Suite 100 Naperville, Illinois 60563 TEL: 630. 717. 6100 FAX: 630. 548. 5568

Reply To: Buffalo Grove

Writer's Direct No: (847) 777-7288

Writer's E-mail: dhinton@ksnlaw.com

Florida Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, Florida 32314

Re: Kien Enterprises, LLC

Articles of Organization

Dear Sir/Madam:

Enclosed herewith is one original and one exact copy of Articles of Organization to establish the above captioned Florida limited liability company. Also enclosed is a check from our law firm in the amount of \$160.00 payable to the Florida Department of State to cover the filing fee for the Articles of Organization as well as a certified copy and certificate of status.

Please file these Articles and return the above documentation to this office unless custom or statute requires that it be sent to the registered agent. Please contact me if you are unable to file the enclosed Articles.

Very truly yours,

David C. Hinton, Corporate Paralegal

dch

Enclosures

CC:

Michael P. Rhoades, Esq.

Ms. Janet G. Kien

OG AUG 31 PM 3: 30
SECRETARY OF STATE

C. Hinton

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nam		
The name of the Lin	nited Liability Company is:	
KIEN ENTE	RPRISES, LLC	
ARTICLE II - Add The mailing address		office of the Limited Liability Company is:
Principal Office Ad	ldress:	Mailing Address:
100 Lake Shor	e Dr. Ll	100 Lake Shore Dr. L1
North Palm Be	ach, FL 33408	North Palm Beach, FL 33408
APTICI F III - Rea	mistered Agent Régistered Office	& Registered Agent's Speature
The name and the Fl	lorida street address of the registered	d agent are:
_	Janet G. Kien	SET
-	Name	C. OF S. C.
	100 Lake Shore Drive L	PH 3: 30 PH 3: 30
	Florida street address (P.O. Box NO	OT acceptable)
-	North Palm Beach FLC City, State, and Zip	ORIDA 33408

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, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

## ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	STATE
MGR	Janet G. Kien_	
	100 Lake Shore Drive	, L1
	North Palm Beach, FL	33408
		<del></del>
	,	
		·
(Use attachment if necessary)		

Name and Address:

NOTE: An additional article must be added if an effective date is requested.

**REQUIRED SIGNATURE:** 

Signature of a member or an authorized representative of a 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.)

By:

Typed or printed name of signee

## Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)