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To:

Division of Corporations

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From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : 120000000195

Phone : (6 Fax Number : (8

: (850)521-1000 : (850)558-1575

≈ ÉLORIDA/FOREIGN LIMITED LIABILITY CO.

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O'BRIEN HOLDINGS, L.L.C.

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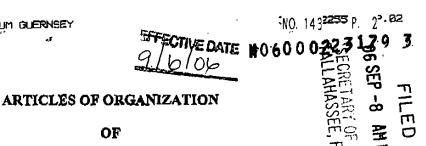
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9/7/2006

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O'BRIEN HOLDINGS, L.L.C.

The undersigned authorized representative of a member subscribes to 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 (the "Company") is: O'BRIEN HOLDINGS, L.L.C.

ARTICLE II - TERM OF EXISTENCE

This limited liability company is to exist perpetually and shall commence existence on September 6, 2006.

ARTICLE III - NATURE OF BUSINESS

The general purposes for which the company is organized are:

- To transact any and all lawful businesses for which a limited liability company may 1. be formed under the laws of the State of Florida.
- To do such other things as are incidental to the foregoing or necessary or desirable 2. in order to accomplish the foregoing.

ARTICLE IV - ADDRESS

The street address of the initial principal office of the company is: 4475 S.W. 14th Street, Coral Gables, Florida 33134 and the name of its initial Registered Agent and his address are: Michael T. O'Brien, 4475 S.W. 14th Street, Coral Gables Florida 33134

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<u>ARTICLES V - INITIAL MEMBERS</u>

The names of the initial members of the Company are:

MICHAEL T. O'BRIEN 1. 4475 S.W. 14th Street Coral Gables, FL 33134

ARTICLE VI - MANAGEMENT

The Company is to be managed by one or more member as provided in the Operating Agreement of the Company.

IN WITNESS WHEREOF, these Articles have been subscribed on this, the _@_ day of September, 2006.

Under penalties of perjury, I declare that I have read the foregoing, and the facts alleged are true, to the best of my knowledge and belief.

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STATE OF FLORIDA SS: COUNTY OF MIAMI-DADE

I HEREBY CERTIFY that on this day, before me, a Notary Public, duly appointed in the State and County named above to take acknowledgments, personally appeared, MICHAEL T. O'BRIEN, to me known to be the person described as the authorized representative in and who executed the foregoing Articles of Organization, and acknowledged before me that he subscribed to these Articles of Organization.

WITNESS, my hand and official seal in the County and State named above, this 6 day of September, 2006.

My Commission Expires:

PUBLIC, State of Florida

ACKNOWLEDGMENT:

HAVING BEEN NAMED TO ACCEPT THE SERVICE OF PROCESS FOR THE ABOVE STATED LIMITED LIABILITY COMPANY, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT TO ACT IN THE CAPACITY, AND AGREE TO COMPLY WITH THE PROVISIONS OF SAID ACT RELATIVE TO KEEPING SAID OFFICE OPEN.

REGISTERED AGENT

J:\38\RJB\O'Brien Articles LLC 9-05-06.wpd

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