

Division of Corporations

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Florida Department of State

Division of Corporations

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To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

Account Number : 075350000353

Phone : (212) 431-5000

Fax Number : (212) 431-1441

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TALLAHASSEE, FLORIDA

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

TIDAL RESEARCH LLC

Certificate of Status	0
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Justin T. Reed

Blumberg Excelsior Corporate Services, Inc.

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November 16, 2006

FLORIDA DEPARTMENT OF STATE

Division of Corporations

BLUMBERG EXCELSIOR CORPORATE SERVICES

SUBJECT: TIDAL RESEARCH LLC
REF: W06000050262

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You must insert the letters "MGRM" in the block above the name and address of each managing member and/or the letters "MGR" in the block above the name and address of each manager listed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Document Specialist

FAX Aud. #: H06000275547
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06 NOV 16 AM 11:25
DIVISION OF CORPORATIONS

P.O. BOX 6327 - Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

TIDAL RESEARCH LLC**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:1500 OCEAN DRIVE, #407
MIAMI BEACH, FL 33139**Mailing Address:**1500 OCEAN DRIVE, #407
MIAMI BEACH, FL 33139**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

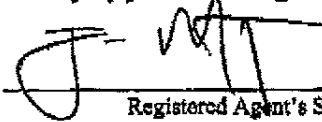
BLUMBERGEXCELSIOR CORPORATE SERVICES, INC.

Name

4435 OLD WINTER GARDEN RDFlorida street address (P.O. Box NOT acceptable)ORLANDO, FL 32811

City, State, and Zip

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, F.S.



JOSE MOJICA, ASSISTANT SECRETARY

Registered Agent's Signature

(CONTINUED)

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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:MGRMJESSE STEIN725 CRANDON BOULEVARDKEY BISCAYNE, FL 3349MGRMPAUL NUTTE1500 OCEAN DRIVEMIAMI BEACH, FL 33139

(Use attachment if necessary)

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.)

JUSTIN T. REED, Organizer

Typed or printed name of signer

Filing Fees:**\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent****\$ 30.00 Certified Copy (Optional)****\$ 5.00 Certificate of Status (Optional)**

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Justin T. Reed
BlumbergExcelsior Corporate Services, Inc.
62 White Street
New York, NY 10013

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