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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

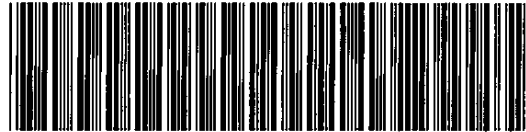
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Effective Date

4/24/07

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2007 APR 25 PM 2:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Michael S. Kravitz
11268 Longshore Way West
Naples, Florida 34119
(215)-885-7300

4/24/07

~~April 18, 2007~~

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Kravitz Dream, LLC.

Dear Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation together with my check in the amount of \$155.00 for the filing fee for the Articles of Organization and Designation of Registered Agent and a certified copy. Please return all correspondence concerning this matter to the above address. Thank you and if you have any questions, please do not hesitate to contact me at (215) 885-7300. *ext 140*

*Plus 5th for
Certificate of Status*

Very Truly Yours,

Michael S. Kravitz

Self Addressed Envelope Enclosed

*Please fax a copy to
215 885 8366*

[Signature]

**ARTICLES OF ORGANIZATION FOR
LIMITED LIABILITY COMPANY**

ARTICLE I - NAME:

The name of the Limited Liability Company is:

KRAVITZ DREAM, LLC

Effective Date

4/24/07

ARTICLE II - ADDRESS:

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


MICHAEL S. KRAVITZ
11268 Longshore Way West
Naples, Florida 34119

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, &
REGISTERED AGENT'S SIGNATURE:**

The name and the Florida street address of the Registered Agent are:

MICHAEL S. KRAVITZ
11268 Longshore Way West
Naples, Florida 34119

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.



MICHAEL S. KRAVITZ

ARTICLE IV - MANAGER:

The name and address of each manager is as follows:


MICHAEL S. KRAVITZ - Manager
11268 Longshore Way West
Naples, Florida 34119

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ARTICLE V – EFFECTIVE DATE:

The effective date is April 24, 2007.

A handwritten signature in black ink, appearing to read 'Michael S. Kravitz', is written over a horizontal line.

MICHAEL S. KRAVITZ

(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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TALLAHASSEE, FLORIDA