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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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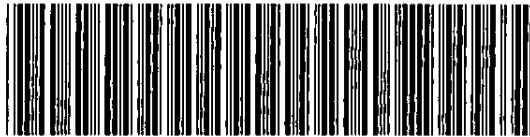
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Law Offices of
JOEL R. LAVENDER, P.A.
507 Southeast 11th Court
Fort Lauderdale, Florida 33316

(954) 522-5101

Fax (954) 523-1221

November 16, 2007

Department of State
Corporations Division
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

VIA AIRBORNE EXPRESS

Re: Articles of Organization for SEAGRAPE COMMONS, LLC

Ladies/Gentlemen:

Enclosed please find the original and one (1) copy of Articles of Incorporation for the above named corporation, along with my check in the amount of \$155.00 for the filing of same. Kindly, return a certified copy of said articles.

If you have any questions, please do not hesitate to contact me.

Very truly yours,



JOEL R. LAVENDER

JRL:vab
Enclosures

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: SEAGRAPE COMMONS, LLC

ARTICLE II - Address:

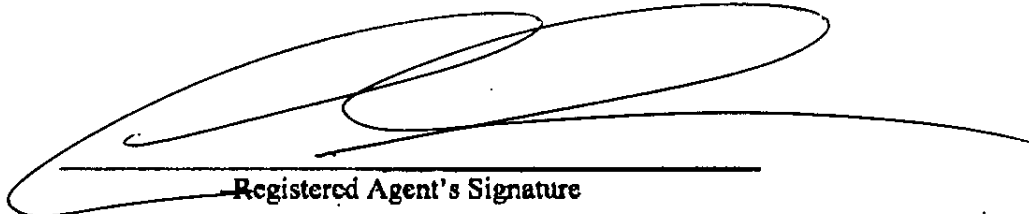
The mailing address and street address of the principal office of the Limited Liability Company is: 2564 Northwest 63 Street, Boca Raton, Florida 33496.

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

ANTHONY B. LOMASCOLO
2564 Northwest 63 Street
Boca Raton, Florida 33496

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,



Registered Agent's Signature

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TALLAHASSEE, FLORIDA

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

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

Title:**Name and Address:**

Managing Member

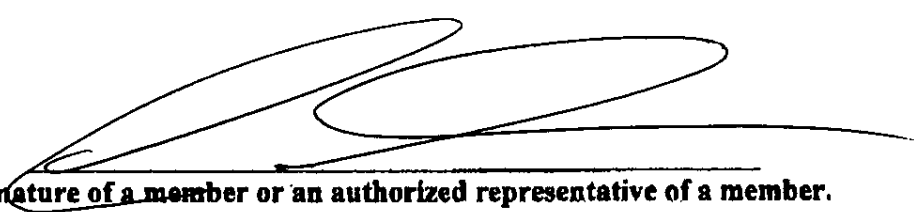
Anthony B. Lomascolo
2564 Northwest 63 Street
Boca Raton, Florida 33496

Managing Member

Anna Marie Lomascolo
2564 Northwest 63 Street
Boca Raton, Florida 33496

Managing Member

Bernard G. Lomascolo
2564 Northwest 63 Street
Boca Raton, Florida 33496



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.)

ANTHONY B. LOMASCOLO
Typed or printed name of signee

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