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ACCOUNT NO. : 072100000032 REFERENCE : 576825 11663B AUTHORIZATION : COST LIMIT : ORDER DATE: May 19, 2008 ORDER TIME : 5:17 PM ORDER NO. : 576825-005 CUSTOMER NO: 11663B DOMESTIC FILING NAME: ZP CAPITAL PARTNERS, LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP \_ ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Susie Knight - EXT. 2956

EXAMINER'S INITIALS:

## ARTICLES OF ORGANIZATION FOR ZP CAPITAL PARTNERS, LLC

### <u>ARTICLE I: NAME</u>

OBLINDO PM 1: 15 The name of the Limited Liability Company is ZP CAPITAL PARTNERS, LLC

#### ARTICLE II: ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is: 101 NE 3rd Avenue, Fort Lauderdale, Florida 33301.

# ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the registered agent are: Steve Skillen, 101 NE 3rd Avenue, Fort Lauderdale, Florida 33301

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 and agree to act in this capacity. I further agree to comply with the provision of all statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent as provided for ih Chapter 608, F.S.

#### ARTICLE IV: MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is therefore, a manager-managed company

ZP CAPITAL PARTNERS, LLC

Steve Skillen, Manager

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(In accordance with Section 608.403(3) F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are truely