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(Requestor's Name) (Address)	600134416826
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Special Instructions to Filing Officer:	RECEIVED 08 AUG 18 AM 10: 36 0EPAG PRENT OF STATE OVISION OF CORPORATIONS TALL AHASSEE, FLORIDA ECTIVE DATE ON AUG 18 AM 10: 36 DEPAG PRENT OF STATE OF
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EXAMINER

Address City/State/Zip Phone # CORPORATION NAME(S) & DOCUM	W. The state of th
1. Taul Sentile (Corporation Name)	C. Management
2. (Corporation Name)	Pocument #)
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(Corporation Name)	(Document #):
4. (Corporation Name)	(Document #)
Walk in Pick up time	Certified Copy
Mail out Will wait	Photocopy Certificate of Status
NEW FILINGS	AMENDMENTS
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other
CR2E631(7/97)	Examiner's Initials

EFFECTIVE DATE 8 14 08

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED	LIABILITY	COSPANY
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The name of the Limited Liability Company is:

Paul Gentile Management Company, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Frincipal Office Address:	<u>Mailing Address:</u>	
c/o Shutts & Bowen LLP	10376 SW 18th Street	
201 South Biscayne Boulevard, Suite 1600	Davie, Florida	
Miami, Florida 33131	33324	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Louis No	stro ,
	Name
c/o Shutts &	Bowen LLP, 201 S. Biscayne Blvd., Ste. 1600
	Florida street address (P.O. Box NOT acceptable)
Miami	_{FL} 33131
	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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Paul L. Gentile c/o Shutts & Bowen LLP, 201 S. Biscayne Blvd., Ste. Miami, Florida 33131
	

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: August 14, 2008. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

Paul L. Gentile

Typed or printed name of signee

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)