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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name

: PROSKAUER ROSE LLP

Account Number : 074673001063

Phone

: (561)995-470477

Fax Number

: (561)988-1211

FLORIDA/FOREIGN LIMITED LIABILITY CO.

The Schmidt Family Foundation, LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: THE SCHMIDT FAMILY FOUNDATION, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 399 NW Second Avenue, Boca Raton, FL 33432

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

NRAI Services, Inc. 2731 Executive Park Drive, Suite 4 Weston, FL 33331

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. If hereby accept the appointment as registered ugent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating 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 the Chapter 608, F.S.

Peter F. Souza

Assistant Secretary

Registered Agent's Signature

(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.)

Richard L. Schmidt, Authorized Representative

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