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Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : HAILE, SHAW & PFAFFENBERGER, P.A.
Account Number : 076326003550
Phone : (561) 627-8100
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: police@haileshaw.com

**FLORIDA LIMITED LIABILITY CO.
17269 LINCOLN LANE LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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**ARTICLES OF ORGANIZATION
OF
17269 LINCOLN LANE LLC**

The undersigned authorized representative of a member, for the purpose of forming a limited liability company under the Florida Limited Liability Act, Florida Statutes Chapter 605 (the "Act"), hereby makes, acknowledges and files the following Articles of Organization:

ARTICLE I -- NAME

The name of the limited liability company is 17269 LINCOLN LANE LLC (the "Company").

ARTICLE II - ADDRESS

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

105 Beach Summit Court
Jupiter, FL 33477

ARTICLE III - REGISTERED AGENT

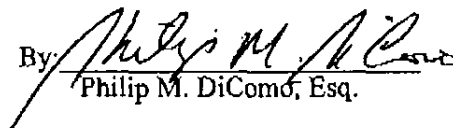
The name and Florida street address of the registered agent are:

Haile, Shaw & Pfaffenberger, P.A.
660 U.S. Highway One - Third Floor
North Palm Beach, FL 33408

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 605, F.S.

Haile Shaw & Pfaffenberger, P.A.

By:


Philip M. DiComo, Esq.

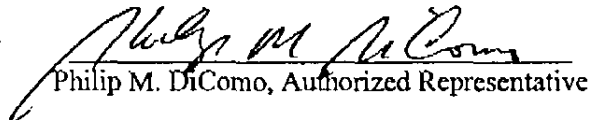
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ARTICLE IV — MANAGEMENT

The name and address of each person authorized to manage and control the Company:

<u>Title</u>	<u>Name and Address</u>
MGR	PTP HOLDINGS, LLC 105 Beach Summit Court Jupiter, FL 33477

REQUIRED SIGNATURE


Philip M. DiComo, Authorized Representative

(In accordance with Section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

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