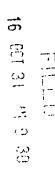
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COVER LETTER

	gistration Section vision of Corporations
SUBJECT:	Energy Science Institute LLC
BODGEC 1.	Name of Limited Liability Company
The enclose	d Articles of Organization and fee(s) are submitted for filing.
Please return	n all correspondence concerning this matter to the following:
	Gayle Aiken, Paralegai
•	Name of Person
	Honigman Miller Schwartz and Cohn LLP
•	Firm/Company
	2290 First National Building
•	Address
	Detroit, MI 48226
-	City/State and Zip Code
<u>t</u>	nabbs@cebev.com
	E-mail address: (to be used for future annual report notification)
For further in	formation concerning this matter, please call:
(Gayle Aiken 313 465-7208
-	Name of Person Area Code Daytime Telephone Number
Enclosed is	a check for the following amount:
]\$125.00 Fili	sing Fee \$130,00 Filing Fee & \$160.00 Filing Fee, Certificate of Status & Cert

Mailing Address
New Filing Section
Division of Corporations
P.O. Box 6327
Taliahassee, FL 32314

Strest Address
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

Energy Science Institute LLC

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

ARTICLE II - Address:

The name of the Limited Liability Company is:

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

Principal Office Address:

Mailing Address:

 2424 North Federal Highway, Suite 101
 2424 North Federal Highway, Suite 101

 Boca Raton, Florida 33431
 Boca Raton, Florida 33431

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:

Name

2424 North Federal Highway, Suite 101

Florida street address (P.O. Box NOT acceptable)

Boca Raton, Florida 3343

City State 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 fur her 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 abligations of my position as registered agent as provided for in Chapter 605, F.S..

(CONTINUED)

gent's Signature (REQUIRED)

Page 1 of 2

	<u> </u>	Name and Address:		
	AMBR" = Authorized Membe	er e e e e e e e e e e e e e e e e e e		
_	'MGR" = Manager MGR	Tammy Hobbs		
-		2424 North Federal Highway, Suite 101		
		Boca Raton, Florida 33431		
-				
-				
_				
(Use attachment if necessary)			
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