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NAME: FUMSAB PROPERTIES, LLC

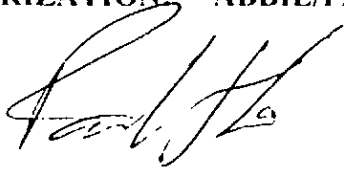
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**ARTICLES OF ORGANIZATION FOR A
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I NAME

The name of the Limited Liability Company is:

FUMSAB PROPERTIES, LLC

ARTICLE II ADDRESS

The principal address of the Limited Liability Company is:

3515 VILLAGE BOULEVARD #402

WEST PALM BEACH, FLORIDA 33409

The mailing address of the Limited Liability Company is:

PO BOX 120010

STATEN ISLAND, NEW YORK 10312

ARTICLE III REGISTERED AGENT

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

A1A REGISTERED AGENT INC.

5647 110TH AVENUE N

ROYAL PALM BEACH, FLORIDA 33411

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.

x Tina Maki
TINA MAKI / Registered Agent's signature

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JUDICIAL CIRCUIT IN AND FOR
THE COUNTY OF PALM BEACH
STATE OF FLORIDA

PAGE 2 FUMSAB PROPERTIES, LLC

ARTICLE IV AUTHORIZED PERSON(S)

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

AUTHORIZED MEMBER

JOSEPH C FUMANDO

3515 VILLAGE BOULEVARD #402

WEST PALM BEACH, FLORIDA 33409

AUTHORIZED MEMBER

ANTHONY N SABATINO

3515 VILLAGE BOULEVARD #402

WEST PALM BEACH, FLORIDA 33409

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X

JOSEPH C FUMANDO / Authorized Representative's signature

(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.)