ACCOUNT NO. : 072100000032

REFERENCE :

AUTHORIZATION :

COST LIMIT : \$ 125

ORDER DATE: March 27, 2000

ORDER TIME: 11:48 AM

ORDER NO. : 639565-005

000003188270--7

CUSTOMER NO: 7209414

CUSTOMER: Mr. Michael G. Anderson

MR. MICHAEL G. ANDERSON

MR. MICHAEL G. ANDERSON

3982 Eunice Road

Jacksonville Be, FL 32250-1902

DOMESTIC FILING

NAME: MICON TECHNOLOGIES, LLC

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION

_ CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

__ CERTIFIED COPY

____ PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Christine Lillich -

EXAMINER'S INITIALS:



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MICON TECHNOLOGIES, LLC

ARTICLE II - Address:

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

3982 EUNICE ROAD, JACKSONVILLE, FLORIDA 32250-1902

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

CORPORATION SERVICE COMPANY Name 1201 HAYS STREET Florida street address (P.O. Box NOT acceptable) Tallahassee FL 32301 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 Agen's Signature

Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

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.)

AUTHORIZED REP., PATRICIA G. PIZZUTO

Typed or printed name of signee

FILING FEES:

\$ 100.00 Filing Fee for Articles of Organization

25.00 Designation of Registered Agent

30.00 Certified Copy (OPTIONAL)
5.00 Certificate of Status (OPTIONAL)

MEMBERS

entre de la <u>la lación de la company de la</u>

MICHAEL ANDERSON 3982 EUNICE ROAD JACKSONVILLE, FLORIDA 32250-1902

DANA ANDERSON 3982 EUNICE ROAD JACKSONVILLE, FLORIDA 32250-1902 OO MAR 29 PN 2: 08

CRL

LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Corporation ("CSC"), a Delaware corporation qualified to do To business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of MICON TECHNOLOGIES, LLC (the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein by CSC without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

This Limited Power of Attorne	y is executed on this
1. la la fissant	Alder
WIZNESS	MICHAR G. ANDERSON
Angela, M.J. Mc Lom B. TYPED OR PRINTED NAME	TYPED OR PRINTED NAME
Roui Can	1
MITNESS CARLICK	
TYPED OR PRINTED NAME	

CRL