



L01000013897

ACCOUNT NO. : 072100000032

REFERENCE : 422015 7282275

AUTHORIZATION : Patricia Ferguson

COST LIMIT : \$ 125.00

ORDER DATE : August 14, 2001

ORDER TIME : 2:44 PM

ORDER NO. : 422015-001

CUSTOMER NO: 7282275

000004540880--4

CUSTOMER: Mr. David Vives
Mr. David Vives

2651 State Road 60 West
Bartow, FL 33830

DOMESTIC FILING

NAME: ORIA USA, LLC

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Norma Hull - EXT. 1115
EXAMINER'S INITIALS:

Handwritten initials and date: 8-20-01

01 AUG 17 AM 9:15 RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
01 AUG 17 PM 4:42
DIVISION OF CORPORATION

APPROVED
AND
FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ORIA USA, LLC

ARTICLE II - Address:

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

2651 STATE ROAD 60 WEST, BARTOW, FLORIDA 33830

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

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

JOE DICESARE
Name
2651 STATE ROAD 60 WEST

Florida street address (P.O. Box **NOT** acceptable)
BARTOW, FL 33830

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..

JOE DICESARE

By: see attached

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

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

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

Laura R. Dunlap
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.)

LAURA R. DUNLAP

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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 AUG 17 AM 9:15

APPROVED
AND
FILED

MANAGING MEMBER OF:

ORIA USA, LLC

David Vives
Managing Member

812 Windsor Avenue
Lakeland, Florida 33803

APPROVED
AND
FILED

01 AUG 17 AM 9:15

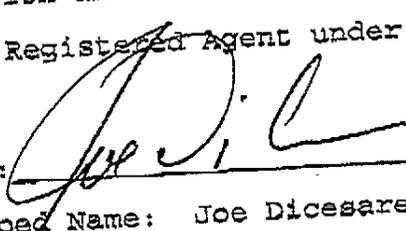
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ACCEPTANCE OF REGISTERED AGENT
DESIGNATED IN THE ARTICLES OF ORGANIZATION

Joe Dicesare, an individual residing in this state, having a business office identical with the registered office of the corporation named below, and having been designated as the Registered Agent in the above and foregoing Articles of Organization of:

ORIA USA, LLC

Joe Dicesare is familiar with and accepts the obligations of the position of Registered Agent under Section 608, Florida Statutes.

By: 

Typed Name: Joe Dicesare

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

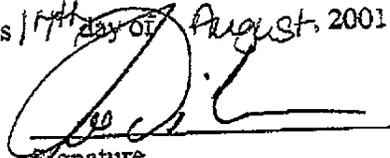
01 AUG 17 AM 9:15

APPROVED
AND
FILED

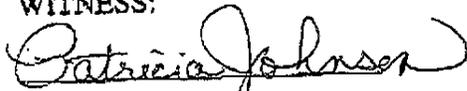
LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do 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 ORIA USA, 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 without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

This Limited Power of Attorney is executed on this 14th day of August, 2001.

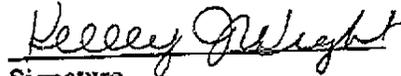

Signature
Joe DiCaro
Print Name of Signer

WITNESS:


Signature

Patricia Johnson
Print Name of Witness

WITNESS:


Signature

Kelley J. Wright
Print Name of Witness

SECRETARY OF STATE
FALLAHASSEE, FLORIDA

01 AUG 17 AM 9:15

APPROVED
AND
FILED