

L 99000007568



ACCOUNT NO. : 072100000032

REFERENCE : 472026 7184109

AUTHORIZATION : *Patricia Pignatelli*
COST LIMIT : \$ 160.00

ORDER DATE : November 8, 1999

ORDER TIME : 1:44 PM

800003038318--8

ORDER NO. : 472026-005

CUSTOMER NO: 7184109

CUSTOMER: Ms. Jeanne Mundie
JACK B. OWEN, JR.
JACK B. OWEN, JR.
Suite 303a
4500 Pga Boulevard
West Palm Beach, FL 33418

DOMESTIC FILING

NAME: DIVOSTA INVESTMENTS, LLC

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Erika Carlson

EXAMINER'S INITIALS:

W 11/9
FILED
99 NOV -8 AM 11:37
SECRETARY OF STATE
TALLAHASSEE FLORIDA

RECEIVED
99 NOV -8 PM 2:24
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

DIVOSTA INVESTMENTS, LLC

ARTICLE II - Address:

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

**4500 PGA Boulevard, Suite 303A
Palm Beach Gardens, FL 33418**

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

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

Jack B. Owen, Jr.

Name

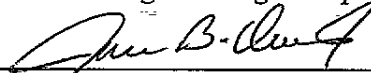
4500 PGA Boulevard, Suite 303A

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

Palm Beach Gardens FL 33418

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..

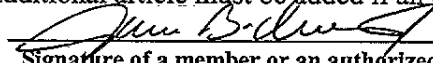
 11/5/99

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 is, therefore, a manager - managed company.

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

 11/5/99
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.)

Jack B. Owen, Jr.

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)

FILED
 99 NOV - 8 AM 11:37
 SECRETARY OF STATE
 TALLAHASSEE FLORIDA