Hocumen Number (nly) OCO 1454

C T Corporation S	System.			
Requestor's Name 660 East Jefferso	on Street			
Address Tallahassee, FL	32301	,	50000245 -03/13/98 ****199	566759 -01063-026 50 ****122.50
City State Zip	Phone		de fancience H	and the second s
CORPORA	ATION(S) NAME			
Diserio Capi	tal Managen	nent, Iwa		
() Profit () NonProfit () Limited Liability Comp	() Amendm	nent	() Merger	ECRETARY O
() Foreign		on/Withdrawal	() Mark	· STA
() Limited Partnership () Reinstatement () Limited Liability Part	() Annual F () Reservat		() Other () Change of () Fictitiou	
Certified Copy	() Photo Co	opies	() CUS	~/ ₁₂
() Call When Ready () Walk In () Mail Out	() Call if Pr () Will Wait		() After 4:30 Pick Up	5//3
Name Availability Document Examiner	3/13/98	PLEASE	E RETURN EXTRAPED FILE STAMPED FILE STAMPED OF CORPORATION	COPY(S)
Updater Verifier	-		RPORA	
Acknowledgment			To.	57
W.P. Verifier				

CR2E031 (1-89)

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	. Diserio Capita	al Wanagomont	Tna				
1.	(Name of corporation: abbreviations of like in or partnership if not so	must include the nport in language	word "INCORPORAT as will clearly indicat	•	•	•	
2.					3. <u>5</u> 823757		
	(State or country unde	r the law of whic	h it is incorporated)		(FEI num	ber, if applicable)	_
4.			5. Perpet				
	(Date of incorpo	ration)	(Dura	ation: Year corp. wi	II cease to exi	st or "perpetual")	
6.	No business tr		Florida as of th da. (See sections 607.		nd 817.155, F.	<u>s.)</u> 8 ₹.,	
7.	. 4 Sawgrass Vil	lage				<u></u> — ≅	
	Ponte Vedra, F	'lorida 32082					
		(Current maili	ing address)			STATE STATE 1: 31	
8.	. To engage in a (Purpose(s) of corpora Florida)	ny lawful ac- ition authorized in	tions or activit n home state or countr	ies for which y to be camed out	corporation in the state of	ns may be organized	
9.	. Name and street ac	Idress of Florid	a registered agent:				
	Name:	C T CORPORA	TION SYSTEM				
	Office Address:	c/o C T Corpora	ation System, 1200 So	uth Pine Island Ro	ad		
		Plantation	, Florida,	33324 (Zip Code)			
H de fu	0. Registered agent a laving been named as r esignated in this applic orther agree to comply with an	registered agent a ation. I hereby ac with the provision	ecept the appointment is of all statutes relativ	as registered agen re to the proper and	t and agree to I complete per	act in this capacity.	I
			C T CORPORATION	SYSTEM			
	·		gistered agent's signa LEBRVAN LASSISTANT SECRE				

(Type Name and Title of Officer)

(FL - 2189 - 9/23/97)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

Matthew J. Diserio

12. Names and addresses of officers and/or directors:

A			-07	\sim	_	
Α.	Di	KI	ECT	W	к	0

Chairman:

Ondimidi.			
Address: _	4 Sawgrass Village		
_	Ponte Vedra, Florida 32082		
Vice Chairm	an:		
Address:			
-			
Director:			
Address:			
Director:			
Address:			
OFFICERS			
President:	Matthew J. Diserio		
Address:	4 Sawgrass Village		
	Ponte Vedra, Florida 32082		
Vice Preside	nt:		
Address:	THE PROPERTY OF THE PROPERTY O		
Secretary:	Vanessa Diserio		
Address:	4 Sawgrass Village		
St. contrainer.	Ponte Vedra, Florida 32082		

B.

ı reasurer:	
Address: _	
NOTE: If necessary, yo and/or directors.	u may attack an addendum to the application listing additional officers
13.	
(Signature of Chairma application)	n, Vice Chairman, or any officer listed in number 12 of the
14. Matthew J. Di	serio, Chairman and President
(Typed or printed name	ne and canacity of person signing application)

State of Delaware

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DISERIO CAPITAL MANAGEMENT, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWELFTH DAY OF MARCH, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.



AUTHENTICATION:

DATE:

8967483

981094881

2851156 8300

03-12-98