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THE UNITED STATES
CORPORATION
COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 531227 5058487

AUTHORIZATION :

Patricia Pigato

COST LIMIT : \$ 125.00

ORDER DATE : December 28, 1999

800003085318--0

ORDER TIME : 1:46 PM

ORDER NO. : 531227-010

CUSTOMER NO: 5058487

CUSTOMER: Ms. Nancy G. Miller
MILLER & MARTIN, LLP
MILLER & MARTIN, LLP
7th Floor
1275 Peachtree Street North Ea
Atlanta, GA 30309-3576

DOMESTIC FILING

NAME: SYMBIOSIS INVESTMENTS OF ST.
AUGUSTINE, LLC

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Angie Glisar

EXAMINER'S INITIALS:

RECEIVED
99 DEC 30 PM 3:50
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
99 DEC 30 PM 12:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Symbiosis Investments of St. Augustine, LLC

ARTICLE II - Address:

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

3 South Street, St. Augustine, FL 32084

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

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

Craig Van Horn

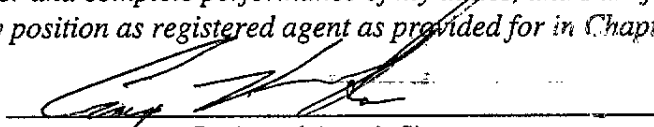
3 South Street Name

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

St. Augustine, FL 32084

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 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)


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.)

Craig Van Horn

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 DEC 30 PM 12:07
SECRETARY OF STATE
TALLAHASSEE FLORIDA