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Re-Cover Investments Company, LL.C. 3300 N. University Drive, Suite 407 Coral Springs FL 33065

Registration Section Division of Corporations 409 E. Gaines St. Tallahassee FL 32399

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January 15, 2000

Dear Registrar:

Please find enclosed the following documents for registration of Re-Cover Investments Company, LL.C.:

1) Articles of Organization;

2) Check for \$155 payable to Florida Department of State for Filing Fee, Designation of Registered Agent, and Certified Copy;

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If you have any questions, please feel free to contact me by mail at 3300 N. University Dr., Suite 407, Coral Springs FL 33065 or by telephone at 1.888.828.6270.

Sincerely

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ARTICLES OF ORGANIZATION FOR RE-COVER INVESTMENTS COMPANY, L.L.C.

ARTICLE I

The name of the Limited Liability Company is: Re-Cover Investments Company, L. C.

ARTICLE II

The mailing address and street address of the principal office of the Limited Liability Company is: 3300 N. University Drive, Suite 407

Coral Springs FL 33065

ARTICLE III

The name and Florida street address of the registered agent is Jay Fontana, 3300 N. University Drive, Suite 407 Coral Springs FL 33065. Having been named as registered agent and to accept service of process for the Limited Liability Company herein at the place of designation herein, 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 of Florida Statutes.

ARTICLE IV

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

ARTICLE V

The Limited Liability which began on January 10th, 2000, shall continue until dissolved by the Company, at which time the Company shall be liquidated.

IN WITNESS WHEREOF, the Limited Liability Company hereto have hereunto set their hands this _____day of January, 2000.

Signature of Authorized Representative

registered Agent's Signature

Print Name of Authorized Representative

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