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AUTHORIZATION : *Patricia Pigato*

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TALLAHASSEE, FLORIDA

ORDER DATE : March 30, 2000

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ORDER NO. : 645049-005

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CUSTOMER NO: 8900A

CUSTOMER: Joseph M. Balocco, Esq  
JOSEPH M. BALOCCO, ESQ  
JOSEPH M. BALOCCO, ESQ  
1323 S.e. Third Avenue

Fort Lauderdale, FL 33316

DOMESTIC FILING

NAME: AQUA ISLES, 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: Christine Lillich

EXAMINER'S INITIALS:

*100-3646*

Name	<i>De 3-31</i>
Address	<i>[Signature]</i>
Company	<i>[Signature]</i>
State	<i>[Signature]</i>
City	<i>[Signature]</i>
Zip	<i>[Signature]</i>
W. P. Co.	<i>[Signature]</i>

RECEIVED  
00 MAR 30 PM 3:54  
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: Aqua Isles, LLC

**ARTICLE II - ADDRESS**

The mailing address and the street address of the principal office of the Limited Liability Company is 407-409 E. Hallandale Boulevard, Hallandale, FL 33009.

**ARTICLE III - DURATION**

The period of duration for the Limited Liability Company shall be perpetual.

**ARTICLE IV - MANAGEMENT**

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Name

Jo Ellen Carr

Address

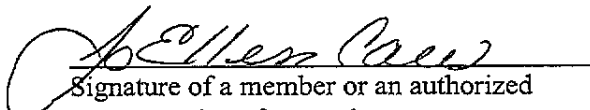
407-409 E. Hallandale Boulevard  
Hallandale, FL 33009

**ARTICLE V - ADMISSION OF ADDITIONAL MEMBERS**

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be conditioned upon the unanimous consent of the members.

**ARTICLE VI - MEMBERS RIGHTS TO CONTINUE BUSINESS**

The right, if given, of the remaining members of the Limited Liability Company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be conditioned upon the unanimous consent of the members.

  
Signature of a member or an authorized  
representative of a member

Jo Ellen Carr

Typed or printed name of signee

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: Aqua Isles, LLC
2. The name and the Florida street address of the registered agent are:

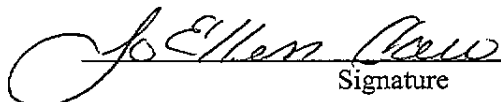
Name: Jo Ellen Carr

Florida Street Address: 407-409 E. Hallandale Boulevard

City, State and Zip Code: Hallandale, FL 33009

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TALLAHASSEE, FLORIDA

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.

  
Signature