

REFERENCE: 655046 11102A AUTHORIZATION : COST LIMIT : \$ PPD ORDER DATE: April 7, 2000 ORDER TIME: 1:33 PM ORDER NO. : 655046-005 300003200413----04/07/00--01083--007 CUSTOMER NO: 11102A ****155.00 ****155.00 CUSTOMER: Ivan M. Lefkowtiz, Esq LEFKOWITZ BLOOM & VAN LEUVEN, LEFKOWITZ BLOOM & VAN LEUVEN, 430 North Mills Avenue Orlando, FL 32803 DOMESTIC FILING NAME: SCN PROPERTIES, L.L.C. EFFECTIVE DATE: XX ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Christine Lillich EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: SCN Properties, L.L.C. ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: 8712 Scenic Oak Court Orlando, Florida 32836 Agent's Signature:

ARTICLE III - Registered Agent, Registered Office, & Registered

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

Ivan M. Lefkowitz, Esquire Name

430 North Mills Avenue Florida street address (P.O. Box NOT acceptable)

> Orlando, Florida 32803 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 gonegistered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature

ARTICLE IV - Management (Check box if applicable) [X] The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

ARTICLE V - Effective Date The Limited Liability Company shall have an effective date of:

Upon Date of Filing

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.)

> Linda Snell Typed or printed name of signee