



THE UNITED STATES
CORPORATION
COMPANY

L000000013062

ACCOUNT NO. : 072100000032

REFERENCE : 873684 81081A

AUTHORIZATION :

Patricia Pzyats

COST LIMIT : \$ 125.00

ORDER DATE : October 24, 2000

ORDER TIME : 11:03 AM

ORDER NO. : 873684-005

CUSTOMER NO: 81081A

CUSTOMER: Karen Alexander, Esq
Alexander Dambra & Duhl, P.a.

Suite 201
5737 Okeechobee Boulevard
West Palm Beach, FL 33417

100003436841--4

DOMESTIC FILING

NAME: OFFSHORE SLIPS, L.C.

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Norma Hull - EXT. 1115

EXAMINER'S INITIALS:

W-25046

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00 OCT 24 PM 12:06
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

October 24, 2000

CSC
NORMA HULL

SUBJECT: OFFSHORE SLIPS, L.C.
Ref. Number: W00000025646

We have received your document for OFFSHORE SLIPS, L.C. and the authorization to debit your account in the amount of \$125.00. However, the document has not been filed and is being returned for the following:

The document must contain the entity's complete mailing address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6025.

Trevor Brumbley
Document Specialist

Letter Number: 900A00055557

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF LIMITED LIABILITY COMPANY

OF

OFFSHORE SLIPS, L.C.

The undersigned hereby establishes the following for the purpose of becoming a Limited Liability Company under the laws of the State of Florida, by and under the provisions of the Statutes of the State of Florida providing for the formation, liability, rights, privileges and immunities of a Limited Liability Company profit.

ARTICLE I

Name of Limited Liability Company

The name of this Limited Liability Company shall be OFFSHORE SLIPS, L.C., with its principal office address at 140 Pamela Lane, West Palm Beach, FL 33405, and the mailing address shall be the same.

ARTICLE II

Purpose

This Limited Liability Company is organized for the following purposes:

(a) To have and to exercise all the powers now or hereafter conferred by the laws of the State of Florida upon Limited Liability Companies organized pursuant to the laws under which the Limited Liability Company is organized and any and all acts amendatory thereof and supplemental thereto.

(b) For the purpose of transacting any or all

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business; except that it is not to conduct a banking, safe deposit, trust insurance, surety, express, railroad, canal, telephone, telegraph or cemetery building, a building and loan association, fraternal benefit society or state fair exposition.

(c) To do any and everything pertinent to the above.

ARTICLE III

Initial Registered Office and Agent

The street address of the initial registered office of this Limited Liability Company is: 140 Pamela Lane, West Palm Beach, FL 33405, and the name of the initial registered agent of this Limited Liability Company at that address is: Alexandra C. Cook.

ARTICLE IV

Initial Managers

This Limited Liability Company shall have two (2) managers initially. The number of managers may either be increased or diminished from time to time by the By-laws but shall never be less than one. The name and address of the initial managers of this Limited Liability Company are as follows:

Victor J. Cook, III	140 Pamela Lane West Palm Beach, Florida 33405
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Alexandra C. Cook	140 Pamela Lane West Palm Beach, Florida 33405
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ARTICLE V

Indemnification

This Limited Liability Company shall indemnify any officer or manager or any former manager, to the full extent permitted by law.

ARTICLE VI

Incorporator

The name and address of the person signing these Articles is as follows: Alexandra C. Cook, 140 Pamela Lane, West Palm Beach, Florida 33405.

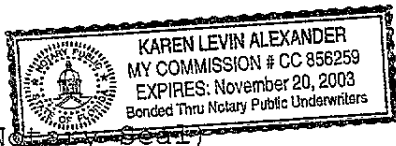
IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Limited Liability Company this 19th day of October, 2000.

Alexandra C. Cook
Alexandra C. Cook


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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA
COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me this 1st
day of Oct, 2000, by Alexandra C. Cook who is personally known
to me or who has produced _____ as identification and
who did take an oath.



(Notary Seal)



Notary Public, State of Florida

My Commission Expires:

Karen Levin Alexander

Print Name of Notary

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE DESIGNATING PLACE OF BUSINESS
OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA
NAMING AGENT UPON WHOM PROCESS MAY BE SERVED**

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE
FOLLOWING IS SUBMITTED:

FIRST: THAT OFFSHORE SLIPS, L.C. DESIRING TO ORGANIZE OR
QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL
PLACE OF BUSINESS AT 140 PAMELA LANE, CITY OF WEST PALM BEACH,
STATE OF FLORIDA, HAS NAMED ALEXANDRA C. COOK, LOCATED AT 140
PAMELA LANE, WEST PALM BEACH, STATE OF FLORIDA, AS ITS AGENT TO
ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

Alexandra C. Cook
ALEXANDRA C. COOK, Vice President

10/19/00
(Date)

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE
ABOVE-STATED LIMITED LIABILITY COMPANY, AT THE PLACE DESIGNATED IN
THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I
FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES
RELATIVE TO THE PROPERTY AND COMPLETE PERFORMANCE OF MY DUTIES.

Alexandra C. Cook
ALEXANDRA C. COOK

10/19/00
(Date)

COOK, LLC

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TALLAHASSEE, FLORIDA