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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)205-0383

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
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RECEIVED
02 JUN 28 PM 12:51
DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

capital preservation of america, llc.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Certificate of Status	0
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[Handwritten Signature]
6/28/02 12:46 PM

ARTICLE III

PURPOSES AND POWERS

The general nature of the business to be transacted, and which this Limited Liability Company is authorized to transact, in addition to those authorized by the laws of the State of Florida, and the powers of Limited Liability Companies, shall be as follows:

1. To engage in any activity or business authorized under the Florida Statutes and the laws of the State of Florida.
2. To purchase or otherwise acquire the real property.
3. To purchase, sell, mortgage, encumber and lease the real property and personal property owned by the Company.
4. To purchase or otherwise acquire, undertake, carry on, improve, or develop, all or any of the business, goodwill, rights, assets and liabilities, of any person, firm, association, or corporation, carrying on any kind of business of a similar nature to that which this Limited Liability Company is authorized to carry on, pursuant to the provisions of these Articles and to hold, utilize and in any manner dispose of the rights and property so acquired.
5. To enter into and make all necessary contracts for its business with any person, entity, partnership, association, corporation, and to perform and carry out, assign, cancel or rescind any of such contracts.

The foregoing statement of purposes shall be construed as a statement of both purposes and powers, and shall be liberally construed in the aid of the powers of this Limited Liability Company, and the powers and purposes stated herein shall, in no way limit or restrict the powers granted under the laws of the State of Florida.

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ARTICLE IV

MAILING ADDRESS AND

PRINCIPAL PLACE OF BUSINESS

The mailing address and principal office of this Limited Liability Company shall be located at 300 Sevilla Avenue, Suite 206, Coral Gables, Florida 33134.

ARTICLE V

INITIAL REGISTERED OFFICE AND REGISTERED AGENT


The address of the initial registered office of the Limited Liability Company is 300 Sevilla Avenue, Suite 206, Coral Gables, FL 33134, and the name of the initial Registered Agent is MAYNARD J. HELLMAN, ESQUIRE.

ARTICLE VI

The Limited Liability Company shall be managed by a majority vote of its members.

Executed by the undersigned at Coral Gables, Miami-Dade County this 28th day of June, 2002

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BY: 
MAYNARD J. HELLMAN
AUTHORIZED REPRESENTATIVE OF MEMBER

STATE OF FLORIDA)
) ss:
COUNTY OF MIAMI-DADE)

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared MAYNARD J. HELLMAN, to me known to be the person described in and who

executed the foregoing Articles of Association, and acknowledged before me that he executed the same, and who produced a driver's license for identification and who did take an oath.

WITNESS my hand and official seal in the County and State last aforesaid this 28th day of June, 2002.

Maldina Green
NOTARY PUBLIC, STATE OF FLORIDA
AT LARGE

My Commission Expires:



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TALLAHASSEE, FLORIDA

CERTIFICATE


CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE PURPOSES OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON PROCESS _____ MAY BE SERVED _____

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

THAT CAPITAL PRESERVATION OF AMERICA, L.L.C., IS DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT 300 SEVILLA AVENUE, SUITE 206, IN THE CITY OF CORAL GABLES, STATE OF FLORIDA, HAS NAMED MAYNARD J. HELLMAN, 300 SEVILLA AVENUE, SUITE 206, CORAL GABLES, FLORIDA 33134 AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

BY: 

Having been named to accept services of process for the above stated corporation, 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 proper and complete performance of my duties.

Signature: 
MAYNARD J. HELLMAN
(Registered Agent)
Date: 6-28-02

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