

LO2000020422

August 6, 2002

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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-08/09/02--01071--008
****155.00 ****155.00

Dear Sir or Madam,

As per instructions for filing LLC registration, the following information is provided for the registration of DIA MUTUAL, LLC

Name: Cheryl Slossberg

Address: 22484 Middletown Drive
Boca Raton, Florida 33428

Day Time
Telephone: 561-305-2840

Thank You in advance.

FILED
02 AUG -9 PM 3:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Name	
Availability	
Respectfully,	
Document Examiner	DCC
Updater	DCC
Update Verifier	Cheryl Slossberg DCC
Acknowledgement	DCC
W. P. Verifier	DCC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

DIA MUTUAL, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

22484 Middletown Drive, Boca Raton, Florida 33428

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Cheryl Slossberg

Name

22484 Middletown Drive

Florida street address (P.O. Box NOT acceptable)

Boca Raton, Florida 33428

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 as registered agent as provided for in Chapter 608, F.S.

Cheryl Slossberg
Registered Agent's Signature

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TALLAHASSEE, FLORIDA

Article IV - Management (Check box if applicable.)



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

(An additional article must be added if an effective date is requested)

Cheryl Slossberg
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.)

CHERYL SLOSSBERG

Typed or printed name of signee