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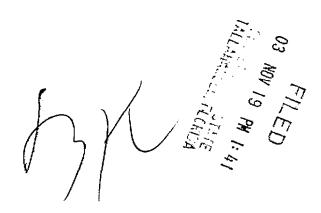
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ACCOUNT NO. : 072100000032 REFERENCE : 327650_ 4325163 AUTHORIZATION: COST LIMIT : \$ 125.00 ORDER DATE: November 18, 2003 ORDER TIME: 8:43 AM ORDER NO. : 327650-005 CUSTOMER NO: 4325163 CUSTOMER: Ms. Suzanne Irwin Flaster, Greenberg, Wallenstein, Roderick, Spirgel Commerce Center 1810 Chapel Avenue West Cherry Hill, NJ 08002 DOMESTIC FILING ISIS ENTERPRISES, L.L.C. NAME: EFFECTIVE DATE: ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY ____PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Susie Knight - EXT. 1156 EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR I	FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is: ISIS ENTERPRISES, L.L.C.	
ARTICLE II - Address: The mailing address and street address of the pr	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
429 S. Beach Road Hobe Sound, FL 33455	429 S. Beach Road Hobe Sound, FL 33455
ARTICLE III - Registered Agent, Registered	l Office, & Registered Agent's Signature;
The name and the Florida street address of the r	egistered agent are:
Thomas A. Domencich Name	
429 S. Beach Road Florida street address (P.C	D. Box <u>NOT</u> acceptable)
Hobe Sound City, State, a	F <u>L</u> 33455 nd 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.

Registered Agent's Signature

(CONTINUED)

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
TACTOR METALLEGING PROMODE	ر م
MGRM	Thomas A. Domencich
	429 S. Beach Road
	Hobe Sound, FL 33455
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(Use attachment if necessary)	
NOTE: An additional article must l	be added if an effective date is requested.
•	•
REQUIRED SIGNATURE:	
	2 10
1 Crac	es a. Downwell
	er or an authorized representative of a member.
(In accordance with se	ction 608.408(3), Florida Statutes, the execution
of this document const that the facts stated he	titutes an affirmation under the penalties of periory
Thomas A. Dome	ncich. Manager
	/ped or printed name of signee
	Filing Tage.
	Filing Fees: \$100.00 Filing Fee for Articles of Organization
	\$ 25.00 Designation of Registered Agent
	\$ 30.00 Certified Copy (Optional)
	\$ 5.00 Certificate of Status (Optional)