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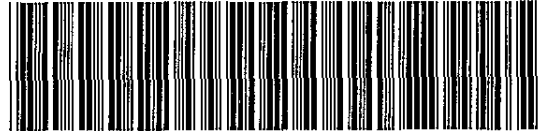
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED

04 APR 16 AM 9:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

04 APR 16 AM 10:39

DEPT. OF REVENUE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

BR



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 571222 10463A

AUTHORIZATION :

Patricia Pizito

COST LIMIT : \$ 155.00

FILED
04 APR 16 AM 9:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : April 15, 2004

ORDER TIME : 8:53 AM

ORDER NO. : 571222-015

CUSTOMER NO: 10463A

CUSTOMER: Ms. Larissa K. Lincoln
Cohen Norris Scherer
Weinberger & Wolmer
Suite 400
712 U.S. Highway 1
North Palm Bch, FL 33408-7146

DOMESTIC FILING

NAME: JAB ALAQUA, LLC

EFFECTIVE DATE:

____ ARTICLES OF INCORPORATION
____ CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
____ PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 2956

EXAMINER'S INITIALS: _____

**ARTICLES OF ORGANIZATION OF
JAB ALAQUA, LLC**

The undersigned hereby forms and establishes a limited liability company pursuant to Chapter 608, Florida Statutes as follows:

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04 APR 16 AM 9:04
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I

The name of this limited liability company is JAB ALAQUA, LLC.

ARTICLE II

This limited liability company shall have perpetual existence from the **DATE OF FILING** of these Articles of Organization with the Department of State, unless sooner terminated as provided in the Operating Agreement executed or to be executed by the members..

ARTICLE III

The mailing address and street address of the principal place of business of this limited liability company is P.O. Box 7564, Jupiter, FL 33468. This limited liability company may, at its discretion, change the address of its principal place of business.

ARTICLE IV

The name and street address of the initial registered agent of this limited liability company is ROBERT SCHWARTZ, 118 Santander Dr., Jupiter, Florida 33458.

ARTICLE V

The management of this limited liability company shall be vested in a member or members (i.e. management committee as described in the Operating Agreement) and is, therefore, a member-managed company. The initial managing member will be Robert Schwartz, at 118 Santander Dr., Jupiter, FL 33458.

ARTICLE VI

Additional members may be admitted to this limited liability company upon such terms and conditions as shall be established by the members as described in the Operating Agreement.

IN TESTIMONY WHEREOF, I have hereunto subscribed my name this 14th day of April, 2004.



ROBERT SCHWARTZ, Managing Member

STATE OF FLORIDA)

COUNTY OF PALM BEACH)

The foregoing instrument was acknowledged before me this 14th day of April, 2004, by ROBERT SCHWARTZ, who is personally known to me or who has produced Florida State Driver's License Number N/A as identification and who did () or did not (X) take an oath.

Executed this 14th day of April, 2004.

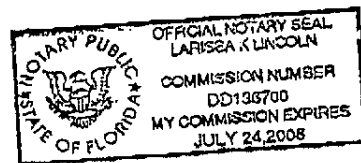


Signature of Notary

Printed Name: LARISSA K. LINCOLN

My Commission Expires:

My Commission Number:



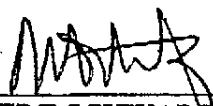
**CERTIFICATE DESIGNATING REGISTERED
OFFICE FOR THE SERVICE OF PROCESS
WITHIN THIS STATE, NAMING AGENT
UPON WHOM PROCESS MAY BE SERVED**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA
STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE
FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED
AGENT, IN THE STATE OF FLORIDA.

That **JAB ALAQUA, LLC**, a Florida Limited liability company, with its office at P.O.
Box 7564, Jupiter, Florida 33468, has named **ROBERT SCHWARTZ**, at 118 Santander Dr.,
Jupiter, FL 33458 as its initial registered agent to accept service of process within this State.

ACKNOWLEDGMENT:


Having been named registered agent to accept service of process for the above-stated
limited liability company at the place designated in this Certificate, I hereby accept to act in such
capacity and agree to comply with the applicable provisions of law.

By: 
ROBERT SCHWARTZ,
Registered Agent

STATE OF FLORIDA)
)
COUNTY OF PALM BEACH)

The foregoing instrument was acknowledged before me this 14th day of April, 2004 by
ROBERT SCHWARTZ, who is personally known to me or who has produced Florida State
Driver's License Number NA as identification and who did () or did
not (X) take an oath.

Executed this 14th day of April, 2004.


Signature of Notary
Printed Name: **LARISSA-K. LINCOLN**
My Commission Expires:
My Commission Number

