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(Requestor's Name)

(Address)

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DIVISION OF CORP REGISTRATION

04 AUG 18 PM 2:36

FLORIDA STATE
HALLMARKS & E. FLORIDA

04 AUG 18 PM 5:12

FBI SD

Handwritten signature/initials



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 853244 4304492

AUTHORIZATION :

COST LIMIT : \$ 125.00

04 AUG 18 PM 5:12
FILED
TALLAHASSEE
FLORIDA
Patricia

ORDER DATE : August 18, 2004

ORDER TIME : 2:19 PM

ORDER NO. : 853244-005

CUSTOMER NO: 4304492

CUSTOMER: Ms. Beverly Montgomery
Piper Rudnick LLP

Suite 1800
203 North LaSalle Street
Chicago, IL 60601-1293

DOMESTIC FILING

NAME: VISTA CENTER, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Justin Cheshire - EXT. 2909

EXAMINER'S INITIALS: _____

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

FILED
04 AUG 18 PM 5:12
STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

VISTA CENTER, LLC

ARTICLE II - Address:

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

Principal Office Address:

8580 Palm Parkway

Orlando, FL 32836

Mailing Address:

8580 Palm Parkway

Orlando, FL 32836

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

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

Corporation Service Company

Name

1201 Hays Street

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

Tallahassee

FLORIDA 32301

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, Florida Statutes..

**Brian Courtney
Asst. V. Pres.**

Registered Agent's Signature

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Hotties, LLC

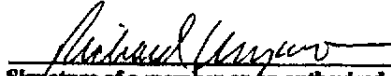
5413 Shingle Creek Drive

Orlando, FL 32821

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



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.)

Hotties, LLC - Managing Member

By: Richard Ungaro - Authorized Signatory

Typed or printed name of signee

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)