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Division of Corporations

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From: Account Name : ELK, BANKER & CHRISTU, LLP
Account Number : 119980000040
Phone : (561) 368-8800
Fax Number : (561) 394-3699

LIMITED LIABILITY COMPANY

Sabia Investments, LLC

Certificate of Status	1
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Estimated Charge	\$160.00

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ELK BANKIER CHRISTU & BAK

561 368 8800 P.02/04



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

April 25, 2005

ELK, BANKER, CHRISTU, LLP

SUBJECT: SABIA INVESTMENTS, LLC
REF: WD5000020612

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Limited liability companies are either member-managed or manager-managed - not both. Member-managed companies are managed by the members of the limited liability company. Manager-managed companies are managed by non-members. Please amend your document to reflect either the limited liability company is member-managed or manager-managed. If the limited liability company is member-managed, list the names and addresses of the members who will manage the company and identify them solely as managing members. If the limited liability company is manager-managed, list the names and addresses of the non-members who will manage the company and identify them solely as managers. You cannot list both managers and managing members.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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ARTICLES OF ORGANIZATION

of

SABIA INVESTMENTS, LLC

**ARTICLE I
NAME**

The name of the limited liability company shall be SABIA INVESTMENTS, LLC

**ARTICLE II
ADDRESS**


The mailing address and street address of the principal office of the Limited Liability Company shall be 51 Roaring Brook Road, Portland, ME 04103.

**ARTICLE III
REGISTERED AGENT, REGISTERED OFFICE
& REGISTERED AGENT'S SIGNATURE**

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

Donald K. Ross, Jr.
c/o Ross Lanier Deifik & Cliff, P.A.
599 Ninth Street North, Suite 300
Naples, FL 34102

Having been named as registered agent to accept service of process for the above stated limited partnership 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.

By: 
DONALD K. ROSS, JR.
Registered Agent's Signature

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**ARTICLE IV
DURATION**

The period of duration for the Limited Liability Company shall be perpetual.

**ARTICLE V
MANAGEMENT**

The Limited Liability Company is to be managed by one or more members and is therefore, a Member-managed company. The name and address of the Managing Member is as follows:

Michael J. True, Managing Member
51 Roaring Brook Road
Portland, ME 04103

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.


MICHAEL J. TRUE, Member

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