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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 217125 81093A

AUTHORIZATION :

COST LIMIT : \$ 125.00

FILED
2006 JUN 30 PM 2:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : June 29, 2006

ORDER TIME : 4:05 PM

ORDER NO. : 217125-005

CUSTOMER NO: 81093A

DOMESTIC FILING

NAME: PROVIA FAMILY, 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: Susie Knight - EXT. 2956

EXAMINER'S INITIALS: _____

Articles of Organization of Povia Family, LLC

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, for the purpose of forming a Limited Liability Company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

Article One Name

The name of the Limited Liability Company is Povia Family, LLC.

Article Two Registered Agent

The initial registered agent of the Company is: Mary Ellen Povia. The registered address of the Company is: 5991 Buckingham Road, Fort Myers, Florida 33905.

Article Three Principal Office

The mailing and street address of the principal office of the Company are: 5991 Buckingham Road, Fort Myers, Florida 33905.

Article Four Management and Purpose

The Company shall be a manager-managed company, and shall initially be managed by Mary Ellen Povia. The Operating Agreement may contain any provisions for the regulation and management of the affairs of the Company not inconsistent with the law or these Articles of Organization. The general purpose of the Company is to perform any lawful business, including the family management of family interests, within or without the State of Florida.

IN WITNESS WHEREOF, the undersigned members have made and subscribe these Articles of Organization at Fort Myers, Florida, for the foregoing uses and purposes this 31st day of April, 2006.

Mary Ellen Povia
Mary Ellen Povia, authorized
representative of the Members

STATE OF FLORIDA
COUNTY OF LEE

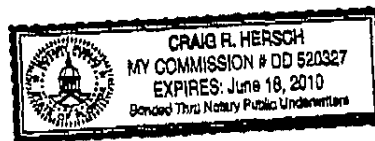
The foregoing instrument was acknowledged before me this 3rd day of April, 2006 by Mary Ellen Povia, who (X) are personally known to me or who () has produced N/A as identification.

(Seal)

My Comm. Expires:
My Comm. No.:

Craig R. Hersch
Notary Public

Printed Notary Signature



Acceptance of Registered Agent

Having been named as registered agent and to accept service of process for Povia Family, LLC, at the place designated herein, 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. I am familiar with and accept the obligations of my position as registered agent, as provided for in Chapter 608, Florida Statutes.

Mary Ellen Povia
Mary Ellen Povia

Date: April 3, 2006