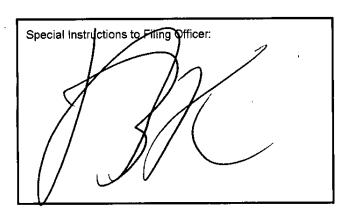
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ORDER NO. : 931995-005	
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DOMESTIC FILING NAME: HIPAL, LLC ,	
EFFECTIVE DATE:	
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	
CONTACT PERSON: Susie Knight - EXT. 2956	
EVAMINED/C INTELLO	

Articles of Organization of HIPAL, LLC

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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 HIPAL, LLC.

Article Two Registered Agent

The initial registered agent of the Company is: Craig R. Hersch. The registered address of the Company is: 9100 College Pointe Court, Fort Myers, Florida 33919.

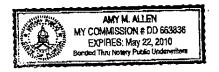
Article Three Principal Office

The mailing and street address of the principal office of the Company are: 14330-B Harbour Links Court, Fort Myers, Florida 33908.

Article Four Management and Purpose

The Company shall be a manager-managed company, and shall initially be managed by Carl E. Palermo, Jr. and Joan A. Palermo. 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 unde	rsigned members have made and subscribe these
Articles of Organization at Fort Myer	s, Florida, for the foregoing uses and purposes this
4th day of June	
	· oth
	(MUQK) OS
	Craig R. Hersch, authorized
	representative of the Members
	representative of the tytomocks
STATE OF FLORIDA	
COUNTY OF LEE	
COUNTIOF LEE	
The foregoing instrument vice	s acknowledged before me this $\frac{44h}{1}$ day of
The totegoths instrument wa	B. Hamah who (Via personally known to me or
	R. Hersch, who (v) is personally known to me or
who () has produced	A as identification.
	1 0 100
	Ch Dr. Wille
	Simulle Skille
(Seal)	Notary Public AMY M. ALLEN
My Comm. Expires:	Printed Notary Signature
My Comm. No.:	



Acceptance of Registered Agent

Having been named as registered agent and to accept service of process for HIPAL, 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.

Craig R. Hersch

Date: June 4th 2007