PIGELIC ACCESS SYSTEM ELECTRONIC FILING COVER SHEET 5000012704))) TO: DIVISION OF CORPORATIONS FROM: RUDEN, MCCLOSKY, SMITH, SCHUSTER & R DEPARTMENT OF STATE 200 E BROWARD BLVD STATE OF FLORIDA PO BOX 1900 409 EAST GAINES STREET FT LAUDERDALE FL 33302-00000 TALLAHASSEE, FL 32399 CONTACT: ANNE MARIE LA FERLA FAX: (904) 922-4000 PHONE: (305) 764-6660 FAX: (305) 764-4996 (((H95000012704))) LIMITED LIABILITY COMPANY DOCUMENT TYPE: NAME: ROYCE INTERNATIONAL, L.C. FAX AUDIT NUMBER: H95000012704 CURRENT STATUS: REQUESTED DATE REQUESTED: 11/13/1995 TIME REQUESTED: 09:36:08 CERTIFICATE OF STATUS: 0 CERTIFIED COPIES: 1 NUMBER OF PAGES: 5 METHOD OF DELIVERY: FAX ESTIMATED CHARGE: \$337.50 ACCOUNT NUMBER: 076077000521 Note: Please print this page and use it as a cover sheet when submitting documents to the Division of Corporations. Your document cannot be processed without the information contained on this page. Remember to type the Fax Audit number on the top and bottom of all pages of the document. (((H95000012704))) ** ENTER 'M' FOR MENU. ** ENTER SELECTION AND <CR>: Alt-Z FOR HELP° VT102 • FDX • 9600 E71 • LOG CLOSED • PRT OFF • 9600 95 KDV 13 PM 12: POTREGUES ON SORT 95 HOV 13 AN 10: 22

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ARTICLES OF ORGANIZATION OF ROYCE INTERNATIONAL, L.C.

The undersigned, desiring to form a limited liability company for the purposes set forth herein and in conformance with the Florida Limited Liability Company Act, does hereby establish the following:

- Name. The name of the limited liability company is Royce International, L.C. 1.
- Duration. The period of duration of the limited liability company is fifty (50) 2. years from the date of filing hereof with the Florida Secretary of State, unless sooner dissolved as provided by statute or by the Royce International, L.C. Regulations.
- 3. Purpose. This limited liability company is organized for the purpose of engaging in any lawful business in which a limited liability company may engage under Florida law.
- 4. Principal Place of Business. The address of its principal place of business is 888 East Las Olas Boulevard, Suite 210, Fort Lauderdale, Florida, 33301.
- 5. Registered Agent and Office. The name and address of its initial registered agent in the State of Florida, whose Consent to Appointment as Registered Agent accompanies these Articles, is Peter R. Fazzone, 888 East Las Olas Boulevard, Suite 210, Fort Lauderdale, Florida, 33301.
- Capitalization. The capital contributions of the Members, having an agreed value 6. totaling \$1,000,00, when contributed, shall be allocated as follows:

Name	Continution
Peter R. Fazzone	\$990.00
Tracey Mencio	\$10.00

Additional Liability of Members. No additional capital contributions of the 7. Members will be required.

> Prepared by: Scott H. Margol, Esq., FL Bar #0522848 Ruden McClosky, Et al., P. O. Box 1900 Fort Lauderdale, Florida 33301

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- Admission of Additional Members. Additional Members may only be admitted with the consent of the Members constituting a majority in interest of the outstanding Membership interest in the limited liability company.
- 9. Continuity. The remaining Members of the limited liability company will have the right to continue the business upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member.
- 10. Management. The business of the limited liability company shall be reserved to and conducted under the exclusive management of its Manager who shall have exclusive authority to act for the limited liability company in all matters. The name and address of the initial Manager of the Company is Peter R. Pazzone, 888 East Las Olas Boulevard, Suite 210, Fort Lauderdale, Florida, 33301.

DATED this 10 day of November, 1995.

Peter R. Fazzone, Member and Manager

Prepared by: Scott H. Margol, Esq., FL Bar #0522848 Ruden McClosky, Et al., P. O. Box 1900

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CERTIFICATE OF DESIGNATION AND ACCEPTANCE OF REGISTERED AGENT

Having been named Registered Agent and designated to accept service of process for Royce International, L.C., at the place designated herein, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

DATED this 10 day of November, 1995.

Peter R. Fazzone

Prepared by: Scott H. Margol, Esq., FL Bar #0522848
Ruden McClosky, Et al., P. O. Box 1900

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AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned Member or authorized representative of a Member of Royce International, L.C. deposes and says:

- 1. The above-named limited liability company has at seast two (2) Members;
- 2. The total amount of cash contributed by the Members is \$1,000.00; and
- 3. The Members have not contributed any property other than cash.

Peter R. Fazzone, Member and Manager

PILLED
SEGNETANT OF STATE
TALL AHARSEE FLOOR

Prepared by: Scott H. Margol, Esq., FL Bar #0522848 Ruden McClosky, Et al., P. O. Box 1900

Fort Lauderdale, Florida 33301

(305) 764-6660

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FILE NOW: Fee after May 1, will be \$263.75 LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE Sandr* R. Mortham ANNUAL REPORT Secre., vi State 1996 DIVISION OF C. PORATIONS FILING FEE Annual Report \$100.00 + \$138.75 Corporation Supplemental Fee \$ 238.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT #L95000000870** ta. Principal Place of Business Address ROYCE INTERNATIONAL, L.C. 888 EAST LAS OLAS BLVD. 888 EAST LAS OLAS BLVD. SUITE 210 SUITE 210 FT. LAUDERDALE FL 33301 FT. LAUDERDALE FL 33301 If above mailing address is incorrect in any ws., line through incorrect information and enter correction in Block 2s 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation Suite, Apr. N, etc 11/13/1995 FLSuite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 45-0618506 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country Country 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent FAZZONE, PETER R 888 E/JT LAS OLAS BLVD. Street Address (P.O. Box Number is Not Acceptable) SUITE 210 FT. LAUDERDALE FL 33301 **200001749412** -03/19/96--01036--022 Suite, Apt #, etc. 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. Thereby accept the appointment as registered agent, and accept the obligations. SIGNATURE DATE __ (Bintarium and Accept and Accept and Accept and ACCet). (Insummoved Accept and Accept an 10. Tilla Managing Members/Managers **Business Street Address** City, State and Zip Code MGR FAZZONE, PETER R 888 EAST OLAS BLVD. SUITE FT. LAUDERDALE FL 11 I do hereby cartify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3) (k). Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as it made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address,

SIGNATURE AND TYPED ON FRINTED NAMED ON SIGNAM MANAGER, IN MITH OR MANAGER

3-5-96

Daylore Phone #

SIGNATURE: