1201 HAYS STREET TALLAHASSEE, FL 32301-2607

> THEN HOP HALL LERVICES ACCOUNT NO. 1 072100000032

> > REFERENCE :

AUTHORIZATION :

COST LIMIT : \$ 285.00

ORDER DATE : October 2, 1996

ORDER TIME : 8:45 AM

ORDER NO. : 106331

90000196711

CUSTOMER NO: 7116643

CUSTOMER: Mr. John H. Wilson MR. JOHN H. WILSON

1035 South Federal Highway

#209

Delray Beach, FL 33483

DOMESTIC FILING

NAME:

WINVISTA L.C.

EFFECTIVE DATE:

ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED LIABILITY COMPANY

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Danny G. Smith

EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

WINVISTA L.C.

ARTICLE II - Address:

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

1035 South Federal Highway #209 Delray Beach, Florida 33483

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be: perpatual

ARTICLE IV - Management: (check and complete the appropriate statement)

The Limited Liability Company is to be managed by a manager or mana	gers and	he name(s)
and address(es) of such manager(s) who is/are to serve as manager(s) is/	are:	

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

John H. Wilson 4477 Woodfield Boulevard Roca Raton, Florida 33434

Lawrence C. Foley 70 Park Drive North Rya, New York 10580

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned managing member of WinVista L.C. deposes and says:

۱,	the above named limited liability company has at least two members;
2.	the total amount of cash contributed by the members is \$ 10
3,	if an, the agreed value of property other than cash contributed by members is \$ 0
4.	the amount of cash or property anticipated to be contributed by members is
5,	the total amount of 2, 3, and 4 is

Tobald Miles

Signature of a managing member, (In accordance with section 608.408(3) Florida Statues, the execution of this affidavit constitutes an affirmation under the penalties of perjury that facts stated herin are true)

STATE OF FLORIDA

COUNTY OF PACK BEACH

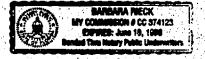
The foregoing instruction to was retrained and before on the produced and produced as instruction and did not take an cush.

Produced identification FLORIDA DR. LICENSE

Type of I.D.

STATE on Florida at Large

My commission Expires:



CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 808.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the limited liability company is:winuista_i.c.	, t 1	
2.	The name and address of the registered agent and office is: CORPORATION SERVICE COMPANY	•	to to
	CORPORATION SERVICE COMPANY	į.	
	(Name) 1201 Hays Street	: : :	1 -8 TI
	(P.O. Box or Mail Drop Box NOT acceptable)	į	
	Tallahassee, Florida 323011		<u> </u>
	(City/State/Zip)	5	

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.

Corporation Service Company

By: Llliciah D. Skipper, as Agent

October 8, 1996

(Date)