

ACCOUNT NO. : 072100000032

REFERENCE : 512141 4804661

AUTHORIZATION:

Patricia Pagito COST LIMIT :

ORDER DATE: August 28, 1997

ORDER TIME : 10:18 AM

ORDER NO. : 512141-005

CUSTOMER NO: 4804661

CUSTOMER: Stephen E. Goodman, Esq

SCHWARTZ & FREEMAN

Suite 1900

401 North Michigan Avenue Chicago, IL 60611-4206

DOMESTIC FILING

NAME: OMH, L.C.

700002279757--8

EFFECTIVE DATE:

	ARTICLES	OF	INCORPORATION		
XX	CERTIFICA	TE	OF	LIMITED	PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Andrew Cumper

EXAMINER'S INITIALS:

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FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

August 28, 1997

CSC NETWORKS 1201 HAYS ST. TALLAHASSEE, FL 32301

SUBJECT: OMH, L.C. Ref. Number: W97000019978 RESUBMIT

Please give original submission date as file date.

We have received your document for OMH, L.C. and the authorization to debit your account in the amount of \$285.00. However, the document has not been filed and is being returned for the following:

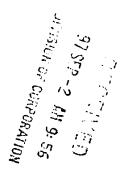
The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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

If you have any questions concerning the filing of your document, please call (850) 487-6052.

Sandy Ng Document Specialist

Letter Number: 497A00043389



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I- Name:

The name of the Limited Liability Company is:

OMH, L.C.

ARTICLE II- Address:

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

808 South Howard Tampa, FL 33606

ARTICLE III- Duration:

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

Perpetual

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

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

Matthew P. Hoffman 808 South Howard Tampa, FL 33606

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:

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED

PURSUANT TO THE PROVISIONS OF SECTION 608.415 Or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. I he name Of	the limited liability Company is:	
		= = = = = = = = = = = = = = = = = = = =
		28
2. The name and	address Of the registered agent and Office is:	A PAR
	Matthew P. Hoffman	
	(NAME)	RIDA
	808 South Howard	
	(P. O. BOX NOT ACCEPTABLE)	
	Tampa, FL 33606	
•	(CITY/STATE/ZIP)	
Having been	named as registered agent and to accept service of p	rocess for the above stated
imited liahili	ity 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
vith the prov	isions of all statutes relating to the proper and comp	lete performance of my
illies, and I (am familiar with and accept the obligations of my po	sition as registered agent.
4.	// ////b//	
//	WATINGA)	
		8/29/97
	(SIONATURE)	(DATE)
	F .	

Filing Fee: \$ 35 for Designation of Registered Agent

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a	member of
OMH, L.C.	deposes and says:
1) the above named limited liability company has at least two	mamhacc
The door named instead the first company has at least two	memoers
2) the total amount of cash contributed by the member(s) is	s <u> </u>
3) if any, the agreed value of property other than cash contribute A description of the property is attached and made a part her	
4) the amount of cash or property anticipated to be contributed	by member(s) is s 100,000
5) the total amounts of 2, 3 and 4 is	s 100,000
Signature of a manufactor authorized representation	SECHANASSEE, FLORIDALLANASSEE,
MATTHEW P. HOFFMAN.	man ve of a memoer.

THE ARTICLES OF ORGANIZATION ARE EXECUTED BY MICHAEL P. HOFFMAN AUTHORIZED MEMBER.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)