

L99000003698



THE UNITED STATES  
CORPORATION  
COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 284271 7137273

AUTHORIZATION :

*Patricia Pizito*

COST LIMIT : \$ 285.00

ORDER DATE : June 23, 1999

ORDER TIME : 11:55 AM

ORDER NO. : 284271-005

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CUSTOMER NO: 7137273

CUSTOMER: Eric M. Sauerberg, Esq  
ERIC M. SAUERBERG, P.A.  
ERIC M. SAUERBERG, P.A.  
Suite 400  
712 U.s. Highway One  
North Palm Beac, FL 33408

DOMESTIC FILING

NAME: SEALOFTER 5, L.L.C.

EFFECTIVE DATE:

ARTICLES OF INCORPORATION  
CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds

EXAMINER'S INITIALS: \_\_\_\_\_

Name	XX
Availability	06/23/99
Document Examiner	DCC
Updater	DCC
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Reviewer	DCC
Adm. Lodgement	DCC
W. P. Verifier	DCC

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

99 JUN 23 PM 3:00

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**ARTICLES OF ORGANIZATION OF  
SEALOFTER 5, L.L.C.**

The undersigned hereby forms and establishes a limited liability company pursuant to Chapter 608, Florida Statutes as follows:

**ARTICLE I**

The name of this limited liability company is SEALOFTER 5, L.L.C.

**ARTICLE II**

This limited liability company shall have perpetual existence from the effective date of filing these Articles with the Department of State unless sooner terminated as provided in the Operating Agreement.

**ARTICLE III**

The mailing address and street address of the principal place of business of this limited liability company is 7296 155th Place North, Palm Beach Gardens, Florida 33418. This limited liability company may, at its discretion, change the address of its principal place of business.

**ARTICLE IV**

The name and street address of the initial registered agent of this limited liability company is TERRY J. PINNA, 7296 155th Place North, Palm Beach Gardens, Florida 33418.

**ARTICLE V**

The management of this limited liability company shall be vested in the managers who shall serve until the first annual meeting of the members or until their successors have been duly elected and qualified as provided in the Operating Agreement. The name and mailing address of the manager is TERRY J. PINNA, 7296 155th Place North, Palm Beach Gardens, Florida 33418.

**ARTICLE VI**

Additional members may be admitted to this limited liability company upon such terms and conditions as shall be established by the manager.

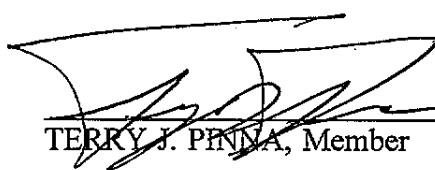
**ARTICLE VII**

The business of this limited liability company shall be dissolved on the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in this limited liability company, unless all the managers and a majority in interest of the remaining members consent to the

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continuation of the business of the limited liability company within ninety (90) days of the occurrence of any event which would otherwise terminate the existence of this limited liability company.

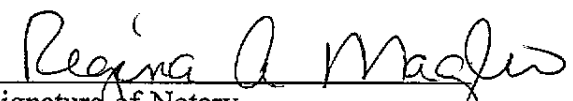
IN TESTIMONY WHEREOF, I have hereunto subscribed my name this 18 day of June, 1999.

FILED  
99 JUN 23 PM 3:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
  
TERRY J. PINNA, Member

STATE OF FLORIDA )  
COUNTY OF PALM BEACH )

The foregoing instrument was acknowledged before me this 18 day of June, 1999, by TERRY J. PINNA, who is personally known to me or who has produced Florida State Driver's License Number 21A as identification and who did ( ) or did not ( ☒ ) take an oath.

Executed this 18 day of June, 1999.

  
Signature of Notary  
Printed Name: Regina A Maglio  
My Commission Expires:  
My Commission Number:



**AFFIDAVIT OF  
SEALOFTER 5, L.L.C.**

COMES NOW SEALOFTER 5, L.L.C., a Florida limited liability company (the "LLC"), by the sole member, TERRY J. PINNA, which, pursuant to Florida Statute Section 608.407(2) deposes and says:

1. The LLC has one member.
2. The amount of capital contributions of the sole member is one hundred dollars (\$100).
3. The anticipated amount of the capital contributions of the sole member is one thousand dollars (\$1,000) cash and property with a value of zero dollars (\$0) for a total anticipated amount of one thousand dollars (\$1,000).

FURTHER AFFIANT SAYETH NOT.

Dated: June 18, 1999.

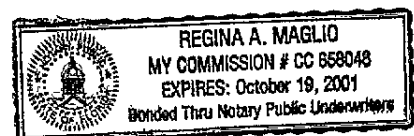
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99 JUN 23 PM 3:00  
TERRY J. PINNA, Member  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

STATE OF FLORIDA            )  
  )  
COUNTY OF PALM BEACH    )

The foregoing instrument was acknowledged before me this 18 day of June, 1999, by TERRY J. PINNA, who is personally known to me or who has produced Florida State Driver's License Number N/A as identification and who did ( ) or did not ( ☒ ) take an oath.

Executed this 18 day of June, 1999.

Regina A. Maglio  
Signature of Notary  
Printed Name: Regina A. Maglio  
My Commission Expires:  
My Commission Number:



**CERTIFICATE DESIGNATING REGISTERED  
OFFICE FOR THE SERVICE OF PROCESS  
WITHIN THIS STATE, NAMING AGENT  
UPON WHOM PROCESS MAY BE SERVED**

Pursuant to Chapter 48.061 and Chapter 608.407 Florida Statutes, the following is submitted:

That SEALOFTER 5, L.L.C., a Florida Limited liability company, with its registered office at 7296 155th Place North, Palm Beach Gardens, Florida 33418, has named TERRY J. PINNA, at the above address as its initial registered agent to accept service of process within this State.

**ACKNOWLEDGMENT:**

Having been named registered agent to accept service of process for the above-stated limited liability company at the place designated in this Certificate, I hereby accept to act in such capacity and agree to comply with the applicable provisions of law.

By:

  
TERRY J. PINNA,  
Registered Agent

SECRET  
STATE  
PALM BEACH, FLORIDA

99 JUN 23 PM 3:00

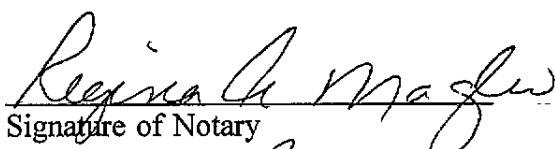
FILED

STATE OF FLORIDA )

COUNTY OF PALM BEACH )

The foregoing instrument was acknowledged before me this 18 day of June, 1999, by TERRY J. PINNA, who is personally known to me or who has produced Florida State Driver's License Number NTA as identification and who did ( ) or did not ( ☒ ) take an oath.

Executed this 18 day of June, 1999.

  
Signature of Notary

Printed Name:

My Commission Expires:

My Commission Number:

