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*HERNANDO RESIDENT PARTNER

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October 21, 1999

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: West Hampton, L.L.C.

Dear Sir or Madam:

Enclosed please find the original and one copy of the Articles of Organization for West Hampton, L.L.C. and our check in the amount of \$155.00. Please file these Articles and return a filed-stamped copy to our office in the enclosed envelope.

Please do not hesitate to give me a call if you have any questions.

Very truly yours,

Linda B. Schumacher
Linda B. Schumacher
Legal Assistant

LBS/me

Enclosures

300003023653--0-
-10/25/99-01085-004
****155.00 ****155.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 OCT 25 PM 2:00

**ARTICLES OF ORGANIZATION FOR
WEST HAMPTON, L.L.C.
A FLORIDA LIMITED LIABILITY COMPANY**

RECEIVED
DIVISION OF CORPORATE ORGANIZATIONS
OCT 25 PM 2:00

ARTICLE I - Name:

The name of the Limited Liability Company is:

West Hampton, L.L.C.

ARTICLE II - Address:

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

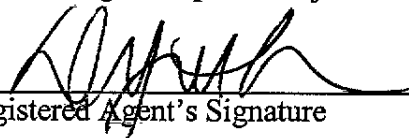
221 Turner Street
Clearwater, FL 33756

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Donna J. Feldman, Esquire
Tew, Zinober, Barnes, Zimmet & Unice
2655 McCormick Drive
Clearwater, FL 33759

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 as provided for in Chapter 608, F.S.



Registered Agent's Signature


ARTICLE IV- Duration:

The Limited Liability Company shall exist until dissolved in a manner provided by law, or as provided in the Operating Agreement adopted by the members.

ARTICLE V - Management

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company and address of the managing member is:

Geoffrey C. Weber
221 Turner Street
Clearwater, FL 33756



Signature of a member or an authorized
representative of a member

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

Geoffrey C. Weber

Typed or Printed Name of Signee

STATE OF FLORIDA

COUNTY OF PINELLAS

The foregoing instrument was acknowledged before me this 11 day of October, 1999, by
Geoffrey C. Weber. He is personally known to me or has produced N/A

(type of identification) as identification.



Signature of Person Taking Acknowledgment

Jo Lynn Jorczak

Name of Acknowledger Typed, Printed or Stamped

(NOTARY SEAL)

Notary Public, State of Florida



Jo Lynn Jorczak
MY COMMISSION # CC520183 EXPIRES
February 17, 2000
BONDED THRU TROY FAIN INSURANCE, INC.

CC520183

Notarial Serial Number

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 OCT 25 PM 2:00