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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 DEC 20 PM 1:41

EFFECTIVE DATE

1-1-03

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

(Business Entity Name)

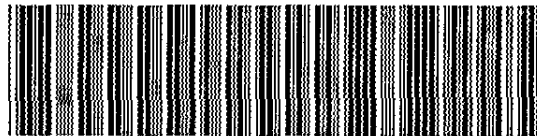
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LEGISLATIVE DIVISION
TALLAHASSEE, FLORIDA

D. WHITE DEC 23 2002



EFFECTIVE DATE

1-1-03

ACCOUNT NO. : 072100000032

REFERENCE : 866966 4300A

AUTHORIZATION :

COST LIMIT : \$ PREPAID

ORDER DATE : December 20, 2002

ORDER TIME : 1:51 PM

ORDER NO. : 866966-005

CUSTOMER NO: 4300A

CUSTOMER: Lawrence Weiner, Esq.
Weiner Cummings & Vittoria

4th Floor
1428 Brickell Avenue
Miami, FL 33131

DOMESTIC FILING

NAME: SPIELER MANAGEMENT, INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP
 ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward - EXT. 1135

EXAMINER'S INITIALS: _____

EFFECTIVE DATE
1-1-03

SPIELER MANAGEMENT, INC.

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 DEC 20 PM 1:41

ARTICLES OF INCORPORATION

The undersigned, desiring to incorporate a corporation under the provisions of the Florida Business Corporation Act, does hereby certify:

1. The name of the Corporation is:

SPIELER MANAGEMENT, INC.

2. The principal mailing address of the Corporation is **One Grove Isle Drive, #901, Coconut Grove, FL 33133.**

3. The aggregate number of shares of capital stock which the Corporation shall have the authority to issue is Three Thousand (3,000) shares of common stock having a par value of One Dollar (\$1.00) each.

4. There shall be no preemptive rights with respect to any shares of stock of the Corporation.

5. The initial registered office of the Corporation shall be located at **One Grove Isle Drive, #901, Coconut Grove, FL 33133**, and the initial Registered Agent shall be **Stanley H. Spieler**.

6. The name and address of the sole incorporator hereof is:

Name

Address

Stanley H. Spieler

**One Grove Isle Drive, #901
Coconut Grove, FL 33133**

7. The initial Board of Directors shall be comprised of One (1) member. The number of Directors may be either increased or diminished from time to time by the Bylaws but shall never be less than one (1).

The name and address of the initial Director is:

Name

Address

Stanley H. Spieler

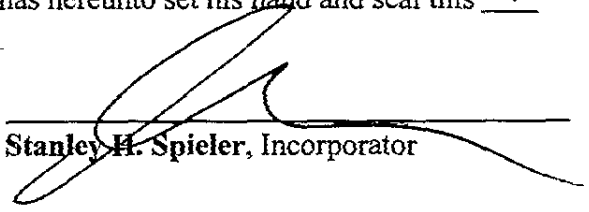
**One Grove Isle Drive, #901
Coconut Grove, FL 33133**

8. The general nature of the business to be transacted by the Corporation shall be to engage in and to do any lawful act permitted under the laws of the United States of America and of the State of Florida.

9. The term for which the Corporation is to exist is perpetual.

10. The formation of this Corporation shall be effective on January 1, 2003.

IN WITNESS WHEREOF, the undersigned has hereunto set his hand and seal this 11TH day of Dec., 2002.


Stanley H. Spieler, Incorporator

STATE OF FLORIDA)


): SS

COUNTY OF MIAMI-DADE)

The foregoing instrument was acknowledged before me this 11TH day of Dec., 2002, by **Stanley H. Spieler**, who is personally known to me, or has produced (type of i.d.) as identification.

 (SEAL)
Notary Public, State of Florida

9818articles.001

 Lawrence Weiner
My Commission CC0923937
Expires April 20, 2004

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

02 DEC 20 PM 1:41

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, 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 corporation is: SPIELER MANAGEMENT, INC.
2. The name and address of the registered agent and office is:

STANLEY H. SPIELER
P.O. BOX NOT ACCEPTABLE

One Grove Isle Drive, #901, Coconut Grove, FL 33133
(CITY/STATE/ZIP)

SIGNATURE
(corporate officer) (Incorporator)

TITLE Incorporator

DATE 12/11/02

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE

DATE 12/11/02