CORPORATION INFORMAT SERVICES, INC. 1201 HAYS STREET TALLAHASSEL, FL 1210 904-222-9171 904-222-0393 FAX

5000015334

MAIL TO: P.O. Box 5828 TALLAHASSEE, FL. 32314

ACCOUNT NO. : 072100000032

REFERENCE : 547451

81099A

AUTHORIZATION :

COST LIMIT : \$ 122.50

ORDER DATE: February 23, 1995

ORDER TIME : 10:57 AM

ORDER NO. : 547451

CUSTOMER NO:

810994

900001413879

CUSTOMER: Bruce M. Levine, Esq BRUCE M. LEVINE, ESQUIRE

Suite 119

5310 N.w. 33rd Avenue Ft. Lauderdale, FL 33309

DOMESTIC FILING

PORTIFINO OF MONROE, INC.

XXX 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: Debbie Skipper

EXAMINER'S INITIALS:

EFFECTIVE DATE

FILED 95 FEB 23 PM 3: 38 SECRESSION OF TALLAHASS EN TOPICS

ARTICLES OF INCORPORATION
OF

PORTIFINO OF MONROE, INC.

The undersigned incorporator hereby forms a corporation under Chapter 607 of the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be:

PORTIFINO OF MONROE, INC.

The address of the principal office of this corporation shall be 1000 Quayside Terrace, Miami, Florida 33138, and the mailing address of the corporation shall be the same.

ARTICLE II. NATURE OF BUSINESS

This corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 1,200 shares of common stock having \$1.00 par value per share.

ARTICLE IV. REGISTERED AGENT

The street address of the initial registered office of the corporation shall be 1201 Hays Street, Tallahassee, Florida 32301, and the name of the initial registered agent of the corporation at that address is Corporation Information Services, Inc.

ARTICLE V. TERM OF EXISTENCE

This corporation shall commence its existence on February 22, 1995, and shall exist perpetually unless sooner dissolved according to law.

ARTICLE VI. DIRECTORS

All corporate powers shall be exercised by or under the authority of, and the business and affairs of the corporation managed under the direction of its Board of Directors, subject to any limitation set forth in these Articles of Incorporation. This corporation shall have two Directors, initially. The names and addresses of the initial members of the Board of Directors are:

Carlo Trupia Dir. 12449 Keystone Road North Miami, Florida 33181

Robert L. Holtz Dir.

1000 Quayside Terrace Miami, Florida 33138

ARTICLE VII. INDEMNIFICATION

The corporation shall indemnify any Officer or Director, or any former Officer or Director, to the full extent permitted by law.

ARTICLE VIII. INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation:

Corporation Information Services, Inc. 1201 Hays Street Tallahassee, Florida 32301

IN WITNESS WHEREOF, the undersigned agent of Corporation Information Services, Inc., has hereunto set their hand and seal of Corporation Information Services, Inc., on February 23, 1995.

CORPORATION INFORMATION SERVICES, INC.

By: XCULO R QUANTED Its Agent, Laura R. Dunlap

ACCEPTANCE OF REGISTERED AGENT DESIGNATED IN ARTICLES OF INCORPORATION

Corporation Information Services, Inc., a Florida corporation authorized to transact business in this State, having a business office identical with the registered office of the corporation named above, and having been designated as the Registered Agent in the above and foregoing Articles, is familiar with and accepts the obligations of the position of Registered Agent under Section 607.0505, Florida Statutes.

CORPORATION INFORMATION SERVICES, INC.

By: X(1000 POLL)
Its Agent, Laura R. Dunlap

Corporation Information Services, Inc. 1201 Hays Street Tallahassee, Fl. 1301 904-222-0393 F. 1301

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MAIL	To:			
P.O.	Box	5828		
TALL	VHAS:	SEE. F	L.	32314

ACCOUNT	NO.	1	0721000000032
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REFERENCE : 552934 81099A

AUTHORIZATION: Patricia Par

COST LIMIT : \$ 87.50

ORDER DATE: March 3, 1995 800001420778

ORDER TIME : 10:24 AM

ORDER NO. : 552934

CUSTOMER NO: 81099A

CUSTOMER: Bruce M. Levine, Esq Bruce M. Levine, Esquire

Suite 119

5310 N.w. 33rd Avenue

Ft. Lauderdale, FL 33309

DOMESTIC AMENDMENT FILING

NAME: PORTIFINO OF MONROE, INC.

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jodie Krebs

EXAMINER'S INITIALS:

a 1

MSIGH OF CORPORATION

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FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

March 3, 1995

CIS JODIE TALLAHASSEE, FL

SUBJECT: PORTIFINO OF MONROE, INC.

Ref. Number: P95000015334

We have received your document for PORTIFINO OF MONROE, INC. and the authorization to debit your account in the amount of \$87.50. However, the document has not been filed and is being returned for the following:

The date of adoption of each amendment must be included in the document.

If an amendment was adopted by the incorporators or board of directors without shareholder action, a statement to that effect and that shareholder action was not required must be contained in the document.

The amendment must be signed by an incorporator if adopted by the incorporators or by a director if adopted by the directors.

If an amendment was approved by the shareholders, the date of adoption of the amendment and one of the following statements must be contained in the document:

(1) A statement that the number of votes cast for the amendment by the shareholders was sufficient for approval.

(2) If more than one voting group was entitled to vote on the amendment, a statement designating each voting group entitled to vote separately on the amendment and a statement that the number of votes cast for the amendment by the shareholders in each voting group was sufficient for approval by that voting group.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return 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 (904) 487-6957.

'arn-French Specialist

Letter Number: 795A00009643

If this approval

then

If this approval

then

this->

AMENDMENT TO ARTICLES OF INCORPORATION

PORTIFINO OF MONROR, INC.

WHEREAS, PORTIFINO OF MONROE, INC., (the "Corporation") corporation duly incorporated under the laws of the State of Florida having an assigned charter number of P95000015334; and

WHEREAS, in accordance with its rights pursuant to Florida Statutes, the corporation desires to effectuate an amendment to its Articles of Incorporation so as to change the name of said corporation.

NOW, THEREFORE, Article I of the Articles of Incorporation of the Corporation is hereby amended so as to provide as follows:

"NAME": The name of this Corporation shall be:

PORTOFINO OF MONROE, INC.

undersigned certifies that he is a director stockholder of the said Corporation. This Amendment is effective upon filing with the Secretary of State and made in evidence of, an agreement to cause such amendment, such agreement having been reached on March 1, 1995, and was adopted by the board of directors, with out shareholder consent, which was not required.

IN WITNESS WHEREOF, the undersigned have hereunto executed

this Amendment, this ____ day of March, 1995

ROBERT L. HOLTZ, Director

STATE OF FLORIDA

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COUNTY OF DADE

BEFORE ME, the undersigned authority, personally appeared Robert L. Holtz, personally known to me and known by me to be the person who, as director, executed the foregoing Amendment to the Articles of Incorporation of Portifino of Monroe, Inc., and he acknowledged before me on oath he executed said instrument.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the county and state aforesaid, this /st day of March, 1995.

Terrorally Known

Notary Public, State of Florida Print Name: GAIS F SHEAK

My Commission Expires: My Commission Number: