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TO: DIVISION OF CORPORATIONS FROM: EMPIRE CORPORATE KIT COMPANY
DEPARTMENT OF STATE 1492 W FLAGLER ST
STATE OF FLORIDA SUITE 200
409 EAST GAINES STREET MIAMI FL 33135-
TALLAHASSEE, FL 32399 CONTACT: RAY STORMONT
FAX: (904) 922-4000 PHONE: (305) 541-3694
FAX: (305) 541-3770
DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.
NAME: FOX HOLLOW FARM, INC.
FAX AUDIT NUMBER: H95000003715 CURRENT STATUS: REQUESTED
DATE REQUESTED: 03/31/1996 TIME REQUESTED: 08:41:33
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TALLAHASSEE, FLORIDA

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8:42 AM

ARTICLES OF INCORPORATION
OF
FOX HOLLOW FARM, INC.

(5)

ARTICLE I. NAME

The name of this corporation is:
FOX HOLLOW FARM, INC.

ARTICLE II. DURATION

This Corporation shall have perpetual existence.

ARTICLE III. PURPOSE

The purpose of this Corporation is to engage in any activities or businesses permitted under the laws of the United States and Florida.

ARTICLE IV. CAPITAL STOCK

The maximum number of shares which this Corporation is authorized to have outstanding at any time is sixty (60) shares of common stock having no par value.

ARTICLE V. INITIAL REGISTERED OFFICE AND AGENT

The initial registered office of this Corporation shall be located at 9200 S. Dadeland Blvd., Suite 412, Miami, Florida 33156 and the initial registered agent of this Corporation at such

BARRY M. BOREN, ESQ
9200 S. DADELAND BLVD.
SUITE 412
MIAMI, FL 33156
(305) 470.2200 / FBN 247286

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TALLAHASSEE, FLORIDA

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Articles of Incorporation
office shall be BARRY M. BOREN, ESQ., who, upon accepting this designation, agrees to comply with the provisions of Section 48.091, Fla. Stat. as amended from time to time, with respect to keeping an office for service of process.

ARTICLE VI. PLACE OF BUSINESS

The principal place of business of this Corporation shall be Miami, Florida and the mailing address of this Corporation shall be 11832 S.W. 79th Terrace, Miami, Florida 33156.

ARTICLE VII. INITIAL BOARD OF DIRECTORS

The initial Board of Directors shall consist of no less than one (1) member and no more than three (3) members.

LAURA MIRSON
11832 S.W. 79th Terr.
Miami, Florida 33156

BRIAN MIRSON
11832 S.W. 79th Terr.
Miami, Florida 33156

ARTICLE VIII. INCORPORATOR

The name and mailing address of the Incorporator signing these Articles of Incorporation is:

BARRY M. BOREN, ESQ.
9200 So. Dadeland Blvd. #412
Miami, Florida 33156

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Articles of Incorporation

ARTICLE IX. INDEMNIFICATION

This Corporation shall indemnify any office or director, or any form officer or director, to the full extent permitted by law.


IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this 24th day of March, 1995.


HARRY M. BOREN, ESQ.

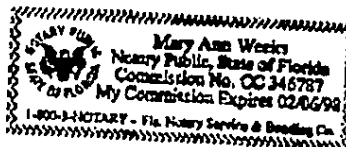
STATE OF FLORIDA)
) SS.
COUNTY OF DADE)

BEFORE ME, the undersigned authority, personally appeared BARRY M. BOREN, ESQ., to me well known and is the individual described therein and who, as Incorporator, executed the foregoing Articles of Incorporation of FOX HOLLOW FARM, INC., and he acknowledged before me that he executed the same for the purposes therein expressed.

WITNESS MY HAND and official seal at Miami, Dade County, Florida this 30th day of March, 1995.


NAME: MARY ANN WEEKS
NOTARY PUBLIC STATE OF FLORIDA

MY COMMISSION EXPIRES:



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Articles of Incorporation

**CERTIFICATE DESIGNATING REGISTERED AGENT
AND STREET ADDRESS FOR SERVICE OF PROCESS
WITHIN FLORIDA**

Pursuant to Florida Statutes §48.091, FOX HOLLOW FARM, INC. desiring to organize under the laws of the State of Florida, hereby designates HARRY M. BOREN, ESQ., 9200 So. Dadeland Blvd., Suite 412, Miami, Florida 33172 as its Registered Agent to accept service of process within the State of Florida.

ACCEPTANCE BY REGISTERED AGENT

Having been named to accept service of process for FOX HOLLOW FARM, INC., at the place designated above in the Articles of Incorporation, HARRY M. BOREN, ESQ., agrees to act in this capacity and agrees to comply with the provisions of Florida Statutes 48.091

DATE 3/29/95


HARRY M. BOREN, ESQ.

Registered Agent

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TALLAHASSEE, FLORIDA

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SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 1, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

APPROVED
AND
FILED

96 OCT 17 PM 12:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT 9600

PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State	
DOCUMENT # P95000025793 (7)			
1. Corporation Name FOX HOLLOW FARM, INC.			
Principal Place of Business 9200 S. DADELAND BLVD. SUITE 412 MIAMI FL 33156		Mailing Address 9200 S. DADELAND BLVD. SUITE 412 MIAMI FL 33156	
2. Principal Place of Business 21 Suite, Apt #, etc 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt #, etc 27 City & State 28 Zip 29 Country 30	
9. Name and Address of Current Registered Agent BOREN, BARRY M 9200 S. DADELAND BLVD. SUITE 412 MIAMI FL 33156		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE: <i>[Signature]</i> DATE: 10/10/96			
12. OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY - ST - ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY - ST - ZIP 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY - ST - ZIP 41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY - ST - ZIP 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY - ST - ZIP 61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY - ST - ZIP	
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the executor or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13, unchanged, or on a separate attachment with an address. SIGNATURE: <i>[Signature]</i> Laura Dean Bennett Mirson (305) 670-2200 Date: _____ Daytime Phone #: _____			

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