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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ACCOUNT NO. : 072100000032
REFERENCE : 648289 7342382
AUTHORIZATION : *Patricia Pijoto*
COST LIMIT : \$ 125.00

ORDER DATE : July 1, 2002
ORDER TIME : 10:13 AM
ORDER NO. : 648289-001
CUSTOMER NO: 7342382
CUSTOMER: Mr. Marcin K. Wasilewski
Mr. Marcin K. Wasilewski
5107 Cortez Ct
Delray Bch, FL 33484

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TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: EXTREME CONCEPTS, LLC

EFFECTIVE DATE: 800006555738--3

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Angie Glisar - EXT. 1124

EXAMINER'S INITIALS: _____

J. BRYAN JUL 22 2002

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - Name:

The name of the Limited Liability Company is:

EXTREME CONCEPTS, LLC

ARTICLE II - Address:

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

5107 CORTEZ COURT, DELRAY BEACH, FL 33484

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

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

Corporation Service Company
Name
1201 Hays Street
Florida street address (P.O. Box NOT acceptable)
Tallahassee FL 32301
City, State, and Zip

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.

Corporation Service Company
By: Laura R. Dunlap
Registered Agent's Signature

Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Laura R. Dunlap
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.)

LAURA R. DUNLAP
Typed or printed name of signee

Filing Fees:
\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

MANAGING MEMBERS
OF
EXTREME CONCEPTS, LLC

MARCIN WASILEWSKI
5107 CORTEZ COURT
DELRAY BEACH, FL 33484

ANDRZEJ KOTYNSKI
5107 CORTEZ COURT
DELRAY BEACH, FL 33484

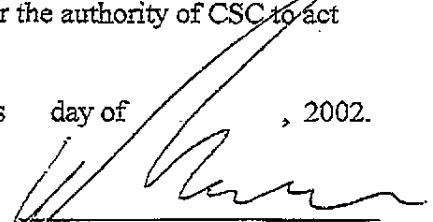
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LIMITED POWER OF ATTORNEY

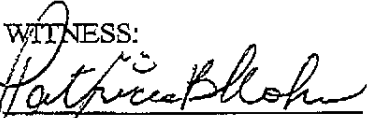
The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of EXTREME CONCEPTS, LLC (the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

This Limited Power of Attorney is executed on this _____ day of _____, 2002.




Signature

MARCIN WASILEWSKI
Print Name of Signer

WITNESS:


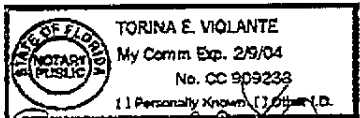
Signature

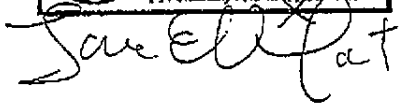
PATRICIA B. KOHN
Print Name of Witness

WITNESS:


Signature

Joseph W Stepan
Print Name of Witness





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6/14/03