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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

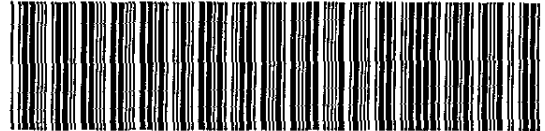
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Anthony P. Valente, Jr., Esquire

Attorney and Counselor at Law

100 Second Avenue South

Suite 1201

St. Petersburg, Florida 33701

Anthony P. Valente, Jr.

Tel: (727) 823-5000

Fax: (727) 894-1023

January 16, 2003

Registration Section
Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314

RE: Epiphany Worldwide, LLC
My File No: 03-004

To Whom It May Concern:

Enclosed please find for filing Articles of Organization for Florida Limited Liability Company, along with my check in the amount of \$160.00 representing the \$100.00 filing fee for the articles, \$25.00 for the designation of registered agent fee, \$30.00 for certified copies, and \$5.00 for a certificate of status.

After filing, please forward the articles and all other documentation to me at the address given above.

Feel free to call with any questions or comments you may have in regard to the foregoing. Thanking you again for your time and attention in this matter, I remain

Very truly yours,



Anthony P. Valente, Jr.

APV/krh

Encs.

cc: client

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: EPIPHANY WORLDWIDE, LLC

ARTICLE II - Address:

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

14100 U.S. 19 North, Suite 118, Clearwater, FL 33764

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

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

ANTHONY P. VALENTE JR., ESQ.

Name

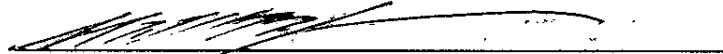
100 Second Ave. S., Ste 1201

Florida street address (P.O. Box **NOT** acceptable)

St. Petersburg FL 33701

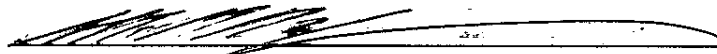
City, State, and Zip

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.



Registered Agent's Signature

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



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.)

ANTHONY P. VALENTE JR., ESQUIRE

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)

160.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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