

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Business Promotions, Inc
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Mike Staples
(Name of Person)
Business Promotions, Inc
(Firm/Company)
896 Island Way
(Address)
Clearwater FL 33767
(City/State and Zip code)

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03 MAR -6 AM 10:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Mike Staples at (727) 441-1182
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Ken Detzner
Secretary of State

February 5, 2003

MIKE STAPLES
BUSINESS PROMOTIONS, INC.
896 ISLAND WAY
CLEARWATER, FL 33767

SUBJECT: BUSINESS PROMOTIONS, INC.
Ref. Number: W03000003380

We have received your document for BUSINESS PROMOTIONS, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

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 (850) 245-6913.

Diane Cushing
Corporate Specialist

Letter Number: 803A00007706

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned Michael P. Staples, do hereby certify
(Name)

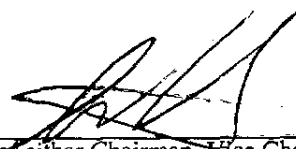
that this Resolution of the Board of Directors of Business Promotions, Inc.
(Corporate Name)

a corporation duly organized and existing under the laws of the State of Montana
was duly adopted on 12 December, 2000.

Be it resolved, that Business Promotions, Inc.
(Corporate Name)

organized and existing in the State of Montana, hereby adopts the name
Organizational Management, Inc. for use in Florida.

Dated: 2/10/03


Signature of either Chairman, Vice Chairman or any officer

Michael P. Staples
Type or print name

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

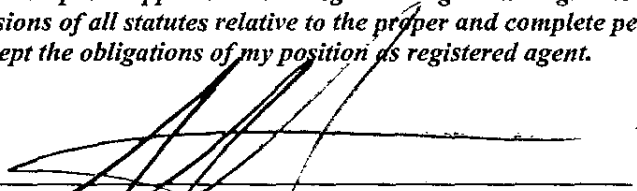
1. Business Promotions, Inc.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Montana 3. 81 0537083
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 12-12-2000 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. upon qualification
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 896 Island Way
(Principal office address)
Clearwater FL 33767
(Current mailing address)
8. Administration
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

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TALLAHASSEE, FLORIDA

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: Michael Staples
Office Address: 896 Island Way
Clearwater, Florida 33767
(City) (Zip code)

10. Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Michael P. Staples
Address: 896 Island Way
Clearwater FL 33767

Vice Chairman: _____
Address: _____

Director: _____
Address: _____

Director: _____
Address: _____

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TALLAHASSEE, FLORIDA

B. OFFICERS

President: Michael P. Staples
Address: 896 Island Way
Clearwater FL 33767

Vice President: _____
Address: _____

Secretary: _____
Address: _____

Treasurer: _____
Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Michael P. Staples, President
(Typed or printed name and capacity of person signing application)

SECRETARY OF STATE
STATE OF MONTANA

CERTIFICATE OF EXISTENCE

I, **Bob Brown**, Secretary of State of the State of Montana, do hereby certify that

BUSINESS PROMOTIONS, INC.

duly filed its Articles of Incorporation in this office on **12/12/2000**, and on that date was created a body politic and corporate.

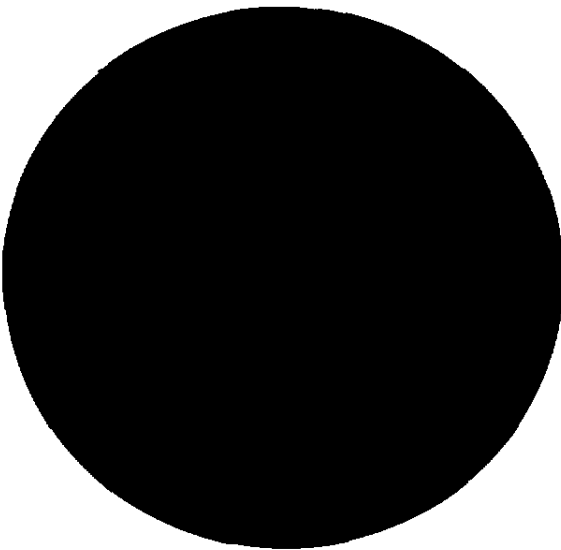
I further certify that all taxes, fees and penalties owed to this state have been paid by said corporation and that the most recent annual report has been filed with this office.

I further certify that no articles of dissolution have been placed on record in this office by said corporation and my records indicate the corporation is in good standing under the laws of the State of Montana and authorized to transact in business and conduct its affairs in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Montana, at Helena, the Capital, this **January 14, 2003**.



BOB BROWN
Secretary of State



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SECRETARY OF STATE
HELENA, MONTANA