STRIKEAPRICE. COM 4416 N. Flagler Drive West Palm Beach, Florida 33407 City/State/Zip Phone

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

| (Corporation Name) | (Document #) |
|---|--|
| 2. (Corporation Name) | (Document #) |
| 3 | 900032710295 -05/30/0001134012 |
| (Corporation Name) | (Document #) 90003271023 |
| 4(Corporation Name) | (Document #) |
| Walk in Pick up time Mail out Will wait NEW FILINGS Profit Not for Profit Limited Liability Domestication Other | Certified Cogy Photocopy Certificate of Status AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger Name |
| OTHER EH INCS | REGISTRATION/QUALIFICATION |
| OTHER FILINGS □ Annual Report □ Fictitious Name | Foreign Limited Partnership Reinstatement Trademark Other Decument Examinat Examinat Updater Updater Verifyer Acknowledgement |
| | Examiner's Initials |



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 1, 2000

STRIKEAPRICE.COM 4416 N. FLAGLER DRIVE WEST PALM BEACH, FL 33407

SUBJECT: STRIKEAPRICE.COM L.L.C.

Ref. Number: W00000014030

We have received your document for STRIKEAPRICE.COM L.L.C. and check(s) totaling \$100.00 of which \$100.00 has been designated to file this document. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is an additional amount of \$25.00 due. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

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) 487-6020.

Tammi Cline Document Specialist

Letter Number: 500A00031002

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SEGRETARY OF STATE
TALL AHASSEE FROME

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

STRIKEAPRICE. COM

ARTICLE II - Address:

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

4416 N. FLAGLER DRIVE

WEST PALM BEACH, FLORIDA 33407

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

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

| VIM | HU | NT | | |
|------------------|------------|--------------|--------|----------|
| 18 11 14 | | ime | 1 = 18 | DRIVE |
| Florida street a | ddress (P. | O. Box NO | | |
| WEST PALM | | ite, and Zip | | <u> </u> |

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

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.

> ective date is requested) (An additional afticle must by a member or an authorized representative of a member. Signature p

(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.)

> SCOTT GARDNER 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)

STRIKEAPRICE, COM

4416 N. Fisgler Drive West Palm Beach, Florida 33407 PHONE 561-863-9490 Cell 414-807-4759

May 20, 2000

Registration Section Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

Dear Registration Dept.

Attached is our completed Articles of Organization and our check in the amount of \$100.00 for filing. Since we are using a fictitious name what are our requirements for publishing. Do you have a sample format that we are required to follow. If you have any questions please contact me at the above address or my Cell phone (414) 807-4759.

Very truly yours,

J. Scott Gardner

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SECRETARY OF STATE
TALLAHASSEE FLOORIA