

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

L000000013358

Integrity Assets Management,
LLC

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-11/01/00--01020--007
****155.00 ****155.00

- ____ Art of Inc. File _____
- ____ LTD Partnership File _____
- ____ Foreign Corp. File _____
- ✓ L.C. File Cert _____
- ____ Fictitious Name File _____
- ____ Trade/Service Mark _____
- ____ Merger File _____
- ____ Art. of Amend. File _____
- ____ RA Resignation _____
- ____ Dissolution / Withdrawal _____
- ____ Annual Report / Reinstatement _____
- ✓ Cert. Copy _____
- ____ Photo Copy _____
- ____ Certificate of Good Standing _____
- ____ Certificate of Status _____
- ____ Certificate of Fictitious Name _____
- ____ Corp Record Search _____
- ____ Officer Search _____
- ____ Fictitious Search _____
- ____ Fictitious Owner Search _____
- ____ Vehicle Search _____
- ____ Driving Record _____
- ____ UCC 1 or 3 File _____
- ____ UCC 11 Search _____
- ____ UCC 11 Retrieval _____
- ____ Courier _____

00 NOV - 1 AM 9:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

Signature _____

Requested by: _____

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

NOV 6 11 11 AM '00
UCC 11 Search
UCC 11 Retrieval
Courier

11-1-00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I: Name:

The name of the Limited Liability Company is: INTEGRITY ASSETS MANAGEMENT LLC.

ARTICLE II: Address:

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

1605 Main Street, Suite 912
Sarasota, Florida 34236

ARTICLE III:

Registered agent, Registered Office, & Registered Agent's Signature:

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

H. William Scovill
1605 Main Street, Suite 912
Sarasota, Florida 34236

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..


H. William Scovill

ARTICLE IV: Management

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


DAVID RANDALL KRAFT, SR.


VICTORIA LYNN KRAFT

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

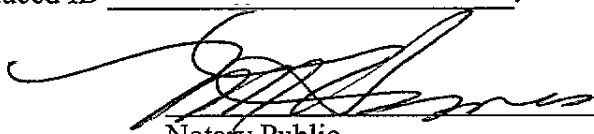
(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

STATE OF FLORIDA
COUNTY OF SARASOTA

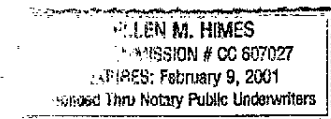
On this 18th day of October, 2000, before me, a Notary Public, personally appeared DAVID RANDALL KRAFT, SR. and VICTORIA LYNN KRAFT who executed the above Articles of Organization, and acknowledged the same to be their free act and deed. DAVID RANDALL KRAFT, SR. and VICTORIA LYNN KRAFT are personally known to me or have produced proper identification.

Personally known X or Produced ID _____

My commission expires:



Notary Public



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AND
FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA