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FILED  
00 DEC 26 PM 5:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

December 21, 2000

Registration Section  
Division of Corporations  
Department of State  
P. O. Box 6327  
Tallahassee, Florida 32399

000003513550---8  
-12/27/00--01005--005  
\*\*\*\*125.00 \*\*\*\*125.00

Re: Sensational Travel, LLC

Dear Sir or Madam:

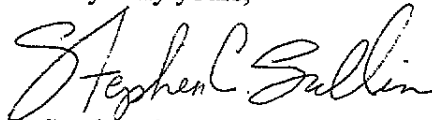
Enclosed please find an original and one copy of the Articles of Organization for the above-captioned limited liability company and our check in the amount of \$125.00 to cover the cost of the following:

Filing Fee	\$100.00
Registered Agent Fee	<u>25.00</u>
	\$125.00

Please file the Articles of Organization, date stamp the enclosed copy and return it to our office. Also, please note that the effective date of the above-referenced Florida Limited Liability Company is January 1, 2001.

Thank you for your assistance.

Very truly yours,

  
Stephen C. Sullivan

L00-16282  
OK

sr  
Enclosures  
Check: \$125.00  
cc: Ms. Valerie Bennett (w/encls.)

eff  
1-1-01

**ARTICLES OF ORGANIZATION FOR FLORIDA  
LIMITED LIABILITY COMPANY**

**ARTICLE I - Name**

The name of the Limited Liability Company is **SENSATIONAL TRAVEL, LLC**

**ARTICLE II - Address**

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

410 Ware Blvd., Suite 105  
Tampa, Florida 33619

**ARTICLE III - Effective Date**

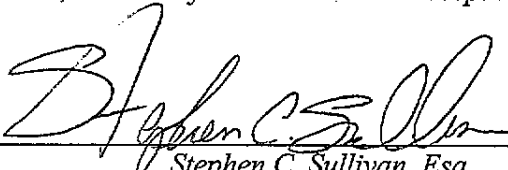
The Limited Liability Company shall be effective as of January 1, 2001.

**ARTICLE IV - Registered Agent, Registered Office, and Resident Agent's Signature**

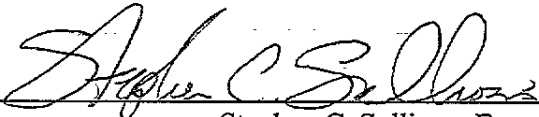
The name and the Florida street address of the registered agent are:

Stephen C. Sullivan, Esq.  
Hines Norman & Associates, P.L.  
315 South Hyde Park Avenue  
Tampa, Florida 33606

*Having been named as registered agent and to accept service of process for the above-named 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.*

  
\_\_\_\_\_  
Stephen C. Sullivan, Esq.

**IN WITNESS WHEREOF**, the undersigned representative hereby acknowledges that, in accordance with section 608.408(3), Florida Statutes, the execution of these Articles constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

  
\_\_\_\_\_  
Stephen C. Sullivan, Esq.

FILED  
09 DEC 26 PM 5:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA