

L01000001583

January 3, 2001

From: Michael A. Cleveland
1495 Watkins Trail
Pensacola, FL 32506
(850) 452-4202

To: Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314
(850) 487-6051

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-01/08/01--01/30--025
****160.00 ****160.00

I have enclosed a check to cover the cost of the Articles of Organization filing fee,
Designation of Registered Agent, Certified Copy, and Certificate of Status; as well my
daytime phone number is listed above.


Michael A. Cleveland

FILED
01 JAN 31 PM 2:02
TALLAHASSEE, FL 32314

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FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

January 11, 2001

MICHAEL A. CLEVELAND
1495 WATKINS TR
PENSACOLA, FL 32506

SUBJECT: VIRTUAL REALITY SOLUTIONS (VRS) LLC
Ref. Number: W01000000888

We have received your document for VIRTUAL REALITY SOLUTIONS (VRS) LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 487-6043.

Shawn Logan
Document Specialist

Letter Number: 401A00001684

FILED
01 JAN 31 PM 2:02
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: VIRTUAL REALITY SOLUTIONS (VRS) LLC

ARTICLE II - Address:

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

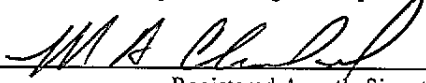
1495 WATKINS TRAIL
PENSACOLA, FLORIDA 32506

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

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

MICHAEL A. CLEVELAND
Name
1495 WATKINS TRAIL
Florida street address (P.O. Box NOT acceptable)
PENSACOLA FL 32506
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

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.

(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.)

MICHAEL A. CLEVELAND
Typed or printed name of signer

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)

FILED
01 JAN 31 PM 2:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA