L02000008418

To Whom It May Concern:

Please find my name and contact information below. Please contact me if any more information is required.

300005173069--6 -03/27/02--01091--005 *****130.00 *****130.00

Eric Violland 2241 Wekiva Reserve Blvd Apopka, Fl 32703

Daytime Phone: 407-444-8035 Anytime Phone: 407-687-3037

A Check for \$130.00 has been enclosed for the filing fee, Designation of Registered Agent and a Certificate of Status.

Thank you,

Eric

W02-88/9 J. BRYAN MAR 282002 J. BRYAN APR - 92002



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 28, 2002

ERIC VIOLLAND 2241 WEKIVA RESERVE BLVD. APOPKA, FL 32703

SUBJECT: SPORT EXPRESSIONS Ref. Number: W02000008819



We have received your document for SPORT EXPRESSIONS and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must contain the designation "L.L.C.," "LLC," "L.C.," or "LC," or the words "LIMITED LIABILITY COMPANY," or "LIMITED COMPANY." Please amend the name of your entity accordingly.

Please return the original and one copy of 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) 245-6043.

Joey Bryan Document Specialist Tax Liens

Letter Number: 602A00018728

ARTICLES OF ORGANEZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - Name: The name of the Limited Liability Company is:
Sport Expressions L.L.C.
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
2241 Wetiva Reserve Blud.
Apopta, Fl. 32703
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature
The name and the Florida street address of the registered agent are:
Fric Violland Name 2241 Wekiva Reserve Blvd. Florida street address (P.O. Box NOT acceptable) Popka Fl. FL 32703 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
Registered Agent's digitative
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. Fric Violland
Rob Sinanian Shawn Rudd (An additional arricle 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

Typed or printed name of signee

that the facts stated herein are true.)

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) -