

ATTORNEY AT LAW 120 EAST CONCORD STREET ORLANDO, FLORIDA 32801

(407)423-1183 FAX (407)841-6746

April 17, 2002

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Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: ICEBREAKERS, LLC

Dear Sir or Madam:

Enclosed please find the Articles of Organization for the above-referenced limited liability company along with the Designation of and Acceptance by Registered Agent and my Check # 7061 in the amount of \$125.00 for the filing fee.

Also enclosed please find a copy of the Articles of Organization to be certified and returned to our office.

Thank you for your assistance in this matter.

Very truly yours,

Donna L. Draves

Enclosures: Original

Original Articles of Organization Copy of Articles of Organization

Check #7061 (\$125.00)

ARTICLES OF ORGANIZATION OF ICEBREAKERS LIMITED LIABILITY COMPANY

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SECRETARY OF STATE
TALLAHASSEE, FISHRIDA

The undersigned, being authorized to execute and file these Articles, hereby

ARTICLE I — Name:

The name of the Limited Liability Company is: ICEBREAKERS, LLC.

ARTICLE II — Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 3956 Town Center Boulevard, Suite 157, Orlando, Florida 32837.

Article III — Registered Agent, Registered Office

The name and the Florida street address of the initial registered agent are: Donna L. Draves, Esq., 120 East Concord Street, Orlando, Florida 32801.

Article IV — Management:

The Limited Liability Company is to be managed by a manager or managers and is, therefore, a manager-managed company. The name and address of the initial manager of the company is: JULIE MAZZARO, 3956 Town Center Boulevard, Suite 157, Orlando, Florida 32837.

Article V — Additional Provisions:

Any Operating Agreement (as defined in Section 608.402(24) of the "Florida Limited Liability Company Act"), relating to this Limited Liability Company must be in writing and signed by all of the members.

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledge them to be my act this 16th day of April, 2002.

JULIE MAZZARO Managing Member

STATE OF FLORIDA COUNTY OF ORANGE

The foregoing instrument was acknowledged before me this 16th day of April, 2002.

PRINT NAME:

NOTARY PUBLIC, STATE OF FLORIDA

My Commission expires:

TYPE OF IDENTIFICATION USED: FL DL M260-431-72-590-0

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SEUREJARY OF STATE
TALL AHASSEF FLORIDA

STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. 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 under Chapter 608, Florida Statutes.

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

REGISTERED AGENT:

DONNIA I DDANES

STATE OF FLORIDA COUNTY OF ORANGE

The foregoing instrument was acknowledged before me this 16th day of April 20

PRINT NAME: Deborath A Samue

NOTARY PUBLIC, STATE OF FLORIDA

My Commission expires: 1/12/2003 TYPE OF IDENTIFICATION USED:_

Samuel Sa

Deborah A Samuel

My Commission CC794968

Expires January 12, 2003