

September 8, 2002

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

500007805075--9 -09/17/02--01057--003 ****160.00 ****160.00

RE: Articles of Organization for Florida Limited Liability Company Memories Made Digital

To Whom It May Concern:

Enclosed please find a copy of the Articles of Organization for Florida Limited Liability Company for Memories Made Digital LLC and a check for \$160 dollars to cover the following:

\$100 Filing Fee for Articles of Organization

\$25 Designation of Registered Agent

\$30 Certified Copy

\$5 Certificate of Status

The mailing and physical addresses of Memories Made Digital are as follows:

Mailing:

P.O. Box 5035

Deltona, Florida 32728-5035

Physical

1661 Bismarck Drive Deltona, Florida 32725

In addition, the business telephone is 386-789-0654. If you have any questions or need additional information, feel free to contact me at this number. Thank you.

Respectfully.

Stephanie McDowell

Memories Made Digital, Registered Agent

Stephane Con Dwelf

WO2-27/79

J. BRYAN SEP 2 6 2002



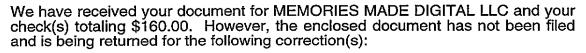
FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

September 18, 2002

STEPHANIE MCDOWELL PO BOX 5035 DELTONA, FL 32728-5035

SUBJECT: MEMORIES MADE DIGITAL LLC

Ref. Number: W02000027179



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) 245-6043.

Letter Number: 202A00053179

Joey Bryan Document Specialist ON THE SERVICE ON THE SERVICE OF THE

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is: Memories Made Digital LLC
Memories Made Digital LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Mailing: P.O. Box 5035 Deltona, FL 32728-503S ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Stephanie McDawell Name
Florida street address (P.O. Box NOT acceptable)
Deltona FL 32725 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.
Stephan C. Mc Double 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.)
Stephanie C. McDowell Typed or printed name of signee

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)