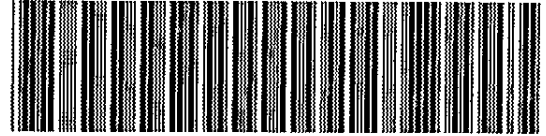


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FILED

OCT 25 PM 1:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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10/25/02--01115--004 **130.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

VANITY FARE ENTERTAINMENT

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02 OCT 25 PM 1:48

October 23, 2002

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

Dear Sir or Madam:

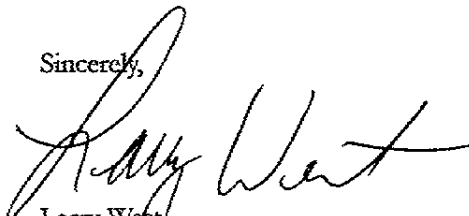
Included is the Articles of Organization for the entity Vanity Fare Entertainment. I've enclosed a check for the amount of \$130 to cover the following:

Filing Fee
Designation of Registered Agent
Certificate of Status

Here is all of my contact information:

Larry West
13814 Osprey Nest LN, Apt. 31
Orlando, FL 32837
(407) 851-7788

Sincerely,



Larry West
Member

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - Name:

The name of the Limited Liability Company is:

Vanity Fare Entertainment, LLC

02 OCT 25 PM 1:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II - Address:

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

3956 Town Center Blvd. Ste 154 Orlando, FL 32837

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

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

Larry West

Name

13814 Osprey Nest LN, Apt. 31

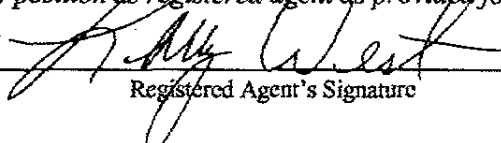
Florida street address (P.O. Box **NOT** acceptable)

Orlando,

FL 32837

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

(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.)

Larry West

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) ✓