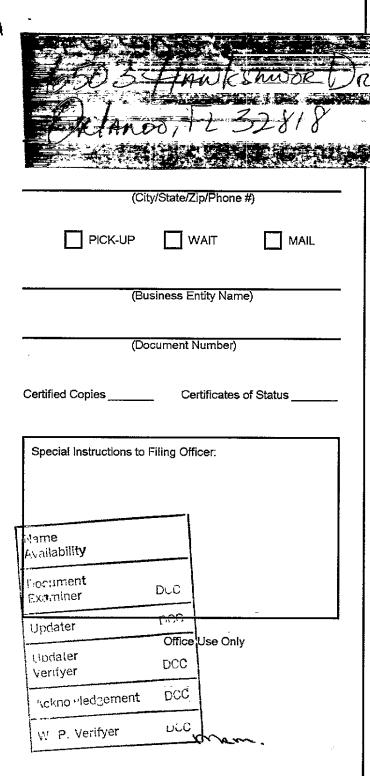
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PILED

SECRETARY OF STATE
SECRETARY OF STATE



FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

November 8, 2002

ELI WILSON, III 6503 HAWKSMOOR DRIVE ORLANDO, FL 32818

SUBJECT: EXODUS ENTERPRISES, LLC

Ref. Number: W02000032123

We have received your document for EXODUS ENTERPRISES, LLC and your check(s) totaling \$125.00. 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) 245-6913.

Letter Number: 902A00061121

Diane Cushing Corporate Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: 4630 S. KIRKMAN RD. SUITE 776 ORLANDO, FL 3281
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Name Name
City, State, and Zip
Having been named as registered agent and to accept service of process for the above shield limited in 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 familiability and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.
(An additional article must/or added it 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.)
ELI WILSON TITE 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)

Exodus Enterprises L.L.C. 4630 S. Krikman Rd. Suite 776 Orlando, FL 32811 (407) 234-2188

Article IV addition

A Member Managed Company:

O'Kema Charles 2131 Lyme Bay Drive Orlando, FL 32839

Eli Wilson, III 6503 Hawksmoor Drive Orlando, FL 32818

R. David Williams 788 S. Conway Road Suite D Orlando, FL 32807 SECRETARY OF STATE
TALLAHASSEE, FLORIDA