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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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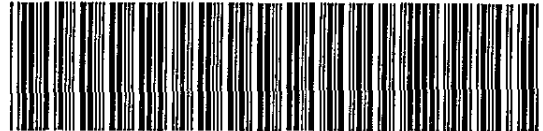
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CLERK OF THE COURT

JUICES WILD. LLC



January 24, 2003

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

To Whom It May Concern:

Enclosed you will find the Articles of Organization for Florida Limited Liability Company documents for Juices Wild, LLC. And a check for \$160.00 made payable to the Florida Department of State for the total amount of filing fees and optional certificate copy and certificate of status.

My mailing address and phone number are as follows:

Craig C. Reger
President
Juices Wild, LLC
4483 Hunting Trail
Lake Worth, Florida 33467
561-967-1669

Please let me know if you need additional information. Thank you.

Sincerely,

Craig C. Reger

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
Juices Wild, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
4483 Hunting Trail , Lake Worth Florida 33467

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

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

Craig Reger

Name

4483 Hunting Trail

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

Lake Worth , Florida 33467 FL

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.

Craig C. Reger

Registered Agent's Signature

(An additional article must be added if an effective date is requested)

Craig C. Reger

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.)

Craig C. Reger

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)

03 JAN 27 AM 8:54
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TALLAHASSEE FLORIDA