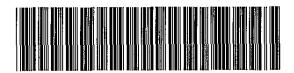
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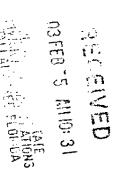
(Requestor's Name)				
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PICK-UP WAIT MAIL				
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Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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ACCOUNT NO. : 072100000032 REFERENCE : **AUTHORIZATION:** COST LIMIT : \$ 125.00 ORDER DATE: January 30, 2003 ORDER TIME : 5:15 PM ORDER NO. : 914435-001 CUSTOMER NO: 7365836 CUSTOMER: Mr. Christopher Mccourt Mr. Christopher Mccourt 10110 Hawthorne Place Dr Apt 201 Riverview, FL 33569 DOMESTIC FILING VERACITY INTERNATIONAL, LLC NAME: EFFECTIVE DATE: ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY ___ PLAIN STAMPED COPY _ CERTIFICATE OF GOOD STANDING

EXAMINER'S INITIALS:

CONTACT PERSON: Susie Knight - EXT. 1156

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

VERACITY INTERNATIONAL, LLC

ARTICLE II - Address:

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

10110 HAWTHORNE PLACE DRIVE, APT 201, RIVERVIEW, FL 33569

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

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

CHRISTOPHER MCCO	URT	
Nan	ne	
10110 HAWTHORNE PL	ACE DRIVE,	APT 2
Florida street address (P	O. Box NOT 2	ecceptable)
RIVERVIEW	FL	33569
City, Star	te, 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.

By: CHRISTOPHER MCCOURT

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.)

DEBORAH D. SKIPPER

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)

VERACITY INTERNATIONAL, LLC

MANAGING MANAGERS LIST

CHRISTOPHER MCCOURT 10110 HAWTHORNE PLACE DRIVE, APT 2 RIVERVIEW, FL 33569

axk

LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of VERACITY INTERNATIONAL, LLC

(the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

This Limited Power of Attorney is executed on this 3 day of Ebruary , 2003

Print Name of Witness