

L0300000 5084

(Requestor's Name)

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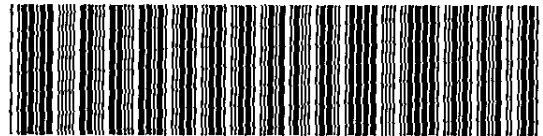
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TALLAHASSEE, FLORIDA



ACCOUNT NO. : 072100000032

REFERENCE : 925789 7358629

AUTHORIZATION :

COST LIMIT : \$ 155.00

Patricia Pantoja
00

ORDER DATE : February 11, 2003

ORDER TIME : 10:49 AM

ORDER NO. : 925789-035

CUSTOMER NO: 7358629

CUSTOMER: Mr. Jason Smith
Tropic Wash, LLC

4300 Nw 27th Street

Cape Coral, FL 33993

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOMESTIC FILING

NAME: PONY MARKETING, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Norma Parramore - EXT. 1147

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PONY MARKETING, LLC

ARTICLE II - Address:

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

4085 Hancock Bridge Parkway, Suite 111, Fort Myers, FL 33903

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

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

Jason Smith
Name

4300 Northwest 27th Street
Florida street address (P.O. Box **NOT** acceptable)

Cape Coral FL 33993
City, State, and Zip

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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: Jason Smith
Registered Agent's Signature

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

Deborah D. Skipper
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)

MANAGING MANAGERS OF:
PONY MARKETING, LLC

Jason Smith
4085 Hancock Bridge Parkway, Suite 111
Ft. Myers, FL 33903

Tamer Elsafy
4085 Hancock Bridge Parkway, Suite 111
Ft. Myers, FL 33903

Gabriel Williams
4085 Hancock Bridge Parkway, Suite 111
Ft. Myers, FL 33903

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CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

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 PONY MARKETING, 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 day of ,


Signature

Jared Smith


Print Name of Signer

WITNESS:


Signature

Ryan Albert Smith
Print Name of Witness

WITNESS:


Signature

Kevin Campbell
Print Name of Witness

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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