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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

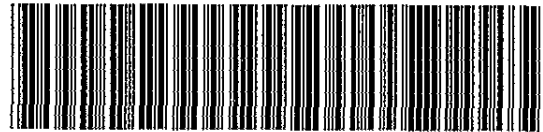
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DOUGLAS J. BURNS, P.A.



Attorney at Law

Water's Edge Office Center
2963 Gulf-to-Bay Blvd. - Suite #120
Clearwater, FL 33759
Ph. (727) 725-2553
Fax (727) 725-9584



Certified Public Accountant

February 11, 2003

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

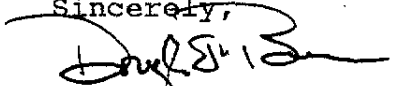
Re: CKS Enterprises, L.L.C.

Dear Sir or Madam:

Enclosed please find the original and one copy of the Articles of Organization for CKS Enterprises, L.L.C., along with a check in the amount of \$125.00 for the filing fee. Please file the Articles at your earliest convenience and return the confirmation of filing to this office.

Do not hesitate to contact me if you have questions. Thank you for your assistance.

Sincerely,


Douglas J. Burns, Esq.

Enclosures

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The undersigned he being a natural person, competent to contract for the purpose of forming a limited liability under the laws of the State of Florida, does hereby adopt the following Articles of Organization in accordance with Section 608.401.

ARTICLE I

NAME OF BUSINESS: The name of the Limited Liability Company shall be **CKS Enterprises, L.L.C.**

ARTICLE II

NATURE OF BUSINESS: The general nature and purpose of business to be transacted, promoted and carried on by the company is to engage in any activity or business now or hereafter authorized and permitted under the laws of the United States and the State of Florida to be done or exercised by company organized for profit.

ARTICLE III

INITIAL CAPITAL: The amount of capital with which this company shall begin business is Five Hundred and 00/100 Dollars (\$500.00).

ARTICLE IV

TERM OF EXISTENCE: This company shall have a perpetual term of existence, commencing upon receipt of these Articles by the Secretary of State.

ARTICLE V

ADDRESS OF BUSINESS: The initial and mailing address of the principal office of the proposed company in the State of Florida shall be:
1696 N. Hercules Ave.
Clearwater, FL 33765

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FILED

ARTICLE VI

The name and street address of the initial registered agent is: Guy P. Kunnen, 1696 N. Hercules Ave., Clearwater, FL 33765.

ARTICLE VII

Management: The Limited Liability Company is to be manager-managed.

IN WITNESS WHEREOF, the undersigned subscribers to this instrument, Articles of Organization of CKS Enterprises, L.L.C. places their hand and seal this 13th day of February, 2003, at Clearwater, Florida.

In the presence of:

Susan W. Davidson
WITNESS Susan W. Davidson

Guy P. Kunnen
Guy P. Kunnen, Member

Anna Kunnen
WITNESS Anna Kunnen

[Signature]
Member

STATE OF FLORIDA

COUNTY OF PINELLAS

SS

BEFORE ME personally appeared Guy P. Kunnen and _____, personally known to me or has produced _____ as identification and who ~~did~~ [did not] take an oath, and known to be the person described in and who executed the foregoing instrument as Member to the foregoing Articles of Organization who, after being first duly sworn, acknowledges that they executed same for the purposes set forth and that all information is true and correct to their best knowledge and belief.

WITNESS my hand and seal on this 13th day of February, 2003, at Clearwater, Florida.

SUSAN W. DAVIDSON
NOTARY PUBLIC - STATE OF FLORIDA
COMMISSION # CC986779
EXPIRES 8/26/2003
BONDED THRU ASA 1-888-NOTARY1

Susan W. Davidson
NOTARY PUBLIC - STATE OF FLORIDA
Printed Name: Susan W. Davidson
My Commission expires: 8/26/03

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 608.415, Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a registered office and registered agent in the State of Florida.

1. The name of the limited liability company is CKS Enterprises, L.L.C.

2. The name and the Florida Street address of the registered agent is: Guy P. Kunnen, 1696 N. Hercules Ave., Clearwater, FL 33765.

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 properly and complete my duties, and I am familiar with and accept the obligations of my position as registered agent.

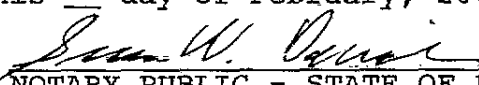

Guy P. Kunnen

STATE OF FLORIDA)
COUNTY OF PINELLAS)

BEFORE ME personally appeared Guy P. Kunnen, to me well known or has produced _____ as identification and who did [did not] take an oath, and known to be the person described in and who executed the foregoing instrument and acknowledged to and before me that he executed the said instrument for the purposes therein expressed.

WITNESS my hand and seal this 13th day of February, 2003.

SUSAN W. DAVIDSON
NOTARY PUBLIC - STATE OF FLORIDA
COMMISSION # CC886779
EXPIRES 8/26/2003
BONDED THRU ASA 1-888-NOTARY1


NOTARY PUBLIC - STATE OF FLORIDA

Printed Name: Susan W. Davidson
My Commission expires: 8/26/03