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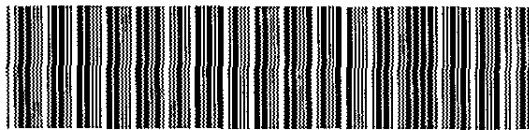
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TALLAHASSEE, FLORIDA



ACCOUNT NO. : 072100000032

REFERENCE : 002501 5674A

AUTHORIZATION :

Patricia Pizito

COST LIMIT : \$ 155.00

ORDER DATE : April 4, 2003

ORDER TIME : 3:54 PM

ORDER NO. : 002501-005

CUSTOMER NO: 5674A

CUSTOMER: Robert C. Burke, Jr., Esq
Kimpton, Burke & Bobenhausen,
P.a.
Suite 100
28059 U.S. Highway 19, North
Clearwater, FL 33761-2698

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TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: THE FULL MONTY, 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: Sara Lea - EXT. 1114

EXAMINER'S INITIALS: _____

**ARTICLES OF ORGANIZATION
OF
THE FULL MONTY, LLC**

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I — Name

The name of the Limited Liability Company is **THE FULL MONTY, LLC.**

ARTICLE II — Address

The mailing address and street address of the principal office of the Limited Liability Company is 1678 North Belcher Road, Clearwater, Florida 33765.

Article III — Registered Agent, Registered Office

The name and the Florida street address of the initial registered agent are Robert D. Winn, 1678 North Belcher Road, Clearwater, Florida 33765.

Article IV — Management

The Limited Liability Company is to be managed by the members and is, therefore, a member-managed company.

IN WITNESS WHEREOF, I have signed these Articles of Organization as a member and acknowledged them to be my act this 4th day of April, 2003.


ROBERT D. WINN

(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.)

Robert D. Winn 

03 APR - 4 16 43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. 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 under Chapter 608, Florida Statutes.

(In accordance with section 608.408(3), Florida Statutes, the execution of this statement constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)


ROBERT D. WINN

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CLERK OF DISTRICT
CLERK OF DISTRICT
TALLAHASSEE, FLORIDA

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