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(Requestor's Name)

(Address)

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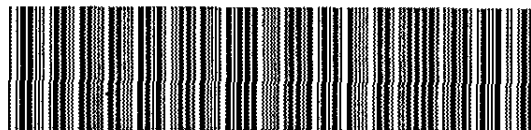
(City/State/Zip/Phone #)

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Christopher A. Desrochers, P.A.

2504 Ave. G NW
Winter Haven, FL 33880
(863) 299-8309
Fax: (863) 295-5765

April 1, 2003

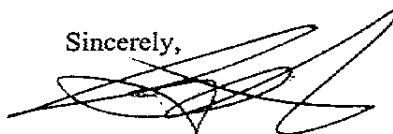
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Tallahassee, FL 32314

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To Whom It May Concern:

Enclosed, please find an original Articles of Organization for Vulcan Ventures, LLC, for filing. Also enclosed is a check for \$125.00, which constitutes the filing fee. I thank you very much for your attention in this matter.

Sincerely,



Christopher Desrochers

Enclosures:

Original Articles of Organization.

Client Ck. #2115 for \$125.00 payable to Fla. Dept. of State.

ARTICLES OF ORGANIZATION
VULCAN VENTURES, LLC
1010 S. LK. ELBERT DR.
PO BOX 2342
WINTER HAVEN, FL 33883-2342

ARTICLE ONE--NAME

The name of the Limited Liability Company is VULCAN VENTURES, LLC.

ARTICLE TWO--ADDRESS

The street address of the principal office of the Limited Liability Company is: 1010 S. LK. ELBERT DR., WINTER HAVEN, FL 33880. The mailing address of the principal office of the Limited Liability Company is: PO BOX 2342, WINTER HAVEN, FL 33883-2342.

ARTICLE THREE--REGISTERED AGENT, REGISTERED OFFICE & REGISTERED
AGENT'S SIGNATURE

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

CHRISTOPHER DESROCHERS, 2504 AVE. G NW, WINTER HAVEN, FL 33880.

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.


Registered Agent

ARTICLE FOUR--MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is, therefore, ~~a manager-managed company.~~


PHIL RINER, Member