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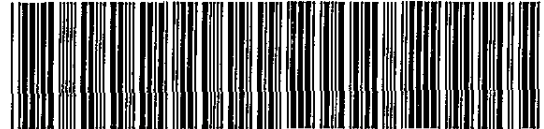
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TALLAHASSEE, FLORIDA

# SHAFFER LOMBARDO SHURIN

A PROFESSIONAL CORPORATION  
ATTORNEYS AT LAW

April 10, 2003

Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

RE: Clouser Stables, L.L.C.  
Christopher Marketing Services, L.L.C.

Dear Sir or Madam:

Enclosed please find the Articles of Organization for Clouser Stables, L.L.C. and Christopher Marketing Services, L.L.C. also enclosed are two checks each for \$160.00 for the filing fees.

If you should need anything further to expedite this process, please do not hesitate to contact me at (816) 931-0500. Thank you for your assistance.

Sincerely,

SHAFFER LOMBARDO SHURIN

  
Janelle A. Martens  
Paralegal

/jm

Enclosures

cc: Leland M. Shurin  
Christopher Clouser

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TALLAHASSEE, FLORIDA

{9065/0033: 00046595.DOC.}

MAIN OFFICE  
4141 PENNSYLVANIA  
KANSAS CITY, MISSOURI 64111  
(816) 931-0500  
TELECOPIER (816) 931-5775

KANSAS OFFICE  
13200 METCALF AVENUE - SUITE 250  
OVERLAND PARK, KANSAS 66213  
(913) 897-3965  
TELECOPIER (913) 897-1690

ST. LOUIS OFFICE  
1015 LOCUST - SUITE 1024  
ST. LOUIS, MISSOURI 63101  
(314) 771-3939

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:  
CLOUSER STABLES, L.L.C.

### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:  
2699 South Bayshore Drive, Miami, Florida 33133

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

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

Steven Demar

Name

2699 South Bayshore Drive

Florida street address (P.O. Box **NOT** acceptable)

Miami

FL 33133

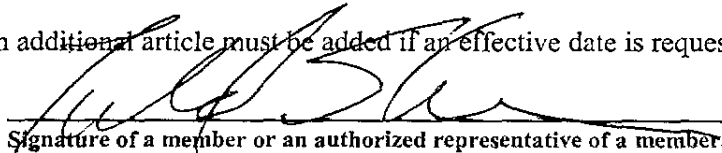
City, State, and Zip

*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.*



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.)

Leland M. Shurin, Attorney

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)

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03 APR 11 AM 5:22  
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