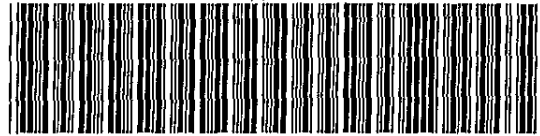


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03 APR 21 PM 2:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



200016333102

04/21/03--01068--006 **125.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TELECOPIER 404-240-9419

03 APR 21 PM 2:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

April 18, 2003

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

Re: Articles of Organization of Vendor Promotions, LLC

Dear Sir or Madam:

Please find enclosed for filing the original executed Articles of Organization of Vendor Promotions, LLC. Please also find enclosed a check in the amount of One Hundred Twenty-Five and No/100 Dollars (\$125.00) made payable to the Florida Department of State to cover the requisite filing fees.

If you have any questions regarding the foregoing, please do not hesitate to contact me.

Sincerely,

Shawn Willson Shepard

cc: Lawrence M. Merlin, Esq.
Mr. William Herder

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

03 APR 21 PM 2:46

ARTICLE I - Name:

The name of the Limited Liability Company is:
Vendor Promotions, LLC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
2861 Executive Drive, Suite 200, Clearwater, FL 33762

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

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

Scott A. Lucas

Name

2861 Executive Drive, Suite 200

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

Clearwater

FL 33762

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.)

Shawn Willson Shepard

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)