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(Requestor's Name)

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(City/State/Zip/Phone #)

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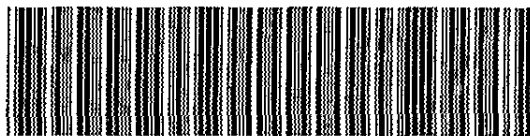
(Business Entity Name)

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FILED
03 MAY -5 AM 10:26
TALLMAHOCK, OHIO

LEWIS RINDER, P. A.
ATTORNEY AT LAW
700 COLORADO AVENUE
STUART, FLORIDA 34994

POST OFFICE BOX 616
PALM CITY, FLORIDA 34991

May 2, 2003

TEL (772) 283-2221

FAX (772) 283-2221

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: Articles of Organization
IMS / AMERICAN, LLC

Dear Sir:

Enclosed please find the Articles of Organization and president agent designation for **IMS / AMERICAN, LLC**

Please file this document and return your acknowledgment of filing to me at the above address. A certified copy of the Articles is not required at this time.

Also enclosed is my check in the amount of \$125.00 to cover your fees in this matter.

Your assistance in this matter is greatly appreciated.

Very truly yours,



LEWIS RINDER

LR/cjr
Enclosures

FILED
03 MAY -5 AM 10:25
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION FOR
IMS / AMERICAN, LLC
A FLORIDA LIMITED LIABILITY COMPANY**

FILED
03 MAY -5 AM 10:26
TALLAHASSEE, FLORIDA

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Chapter 608, Florida Statutes, does hereby adopt the following Articles of Organization for such company:

ARTICLE ONE - NAME

The name of this Limited Liability Company shall be **IMS / AMERICAN, LLC**

ARTICLE TWO - DURATION

The term of existence of this Limited Liability Company shall be perpetual and shall commence on the date the Articles of Organization are filed with the Department of State.

ARTICLE THREE - PURPOSE

The general purpose for which this Limited Liability Company is organized is to engage in or transact any and all lawfull business for which a Limited Liability Company may be organized under the laws of the State of Florida.

ARTICLE FOUR - OFFICE AND MAILING ADDRESSES

The street address of the principal office and the

mailing address of this Limited Liability Company is 200 S.E. Seville Street, Stuart, Florida 34994.

ARTICLE FIVE - REGISTERED AGENT AND REGISTERED OFFICE

The street address of the initial registered office of this Limited Liability Company is 6800 S.W. Jack James Drive, Stuart, Florida 34997. The initial registered agent at such address is DOMINICK LaCOMBE.

IN WITNESS WHEREOF, the undersigned, DOMINICK LaCOMBE, being the duly authorized representative of one of the members of this Limited Liability Company, has executed these Articles of Organization this 2nd day of May, 2003.

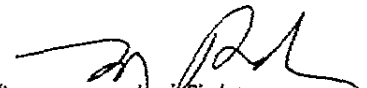

DOMINICK LaCOMBE

STATE OF FLORIDA)
COUNTY OF MARTIN)

The foregoing Articles of Organization were acknowledged before me without oath this 2nd day of May, 2003, by DOMINICK LaCOMBE, identified by FL driver license, the duly authorized representative of one of the members of this Limited Liability Company.

ACCEPTANCE




Lewis Rinder
MY COMMISSION # DD124920 EXPIRES
June 20, 2006
BONDED THRU TROY FAIN INSURANCE, INC.

The undersigned, having been named as Registered Agent and to accept service of process for the above Limited Liability Company at the place designated in these Articles of Organization, does hereby accept said appointment as Registered Agent. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his duties, and I am familiar with and accept the obligations of my

position as Registered Agent as provided in Chapter 608, F.S.

Dated this 2nd day of May, 2003.



DOMINICK LaCOMBE
Registered Agent

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03 MAY -5 AM 10:26
TALLAHASSEE, FLORIDA