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LIMITED LIABILITY COMPANY
COMPLEADS.COM, LLC

Certificate of Status	0
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**ARTICLES OF ORGANIZATION
OF
COMPLEADS.COM, LLC**

I, the undersigned authorized representative of the Members, hereby make, acknowledge and file these Articles of Organization for the purpose of forming a limited liability company under the laws of the State of Florida.

**ARTICLE I
NAME**

The name of this Limited Liability Company is:

COMPLEADS.COM, LLC

**ARTICLE II
ADDRESS**

The mailing address of the principal office is:

2010 NW 21st Street
Boynton Beach, Florida 33436

**ARTICLE III
DURATION**

The period of duration for the Limited Liability Company shall be perpetual.

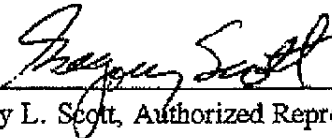
**ARTICLE IV
MANAGEMENT**

The powers of the Limited Liability Company shall be exercised by or under the authority of, and the business and affairs of the Limited Liability Company shall be managed under the direction of its Manager and is, therefore, a manager-managed company.

APPROVED
AND
FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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IN WITNESS WHEREOF, the undersigned authorized representative of the Members has made and subscribed these Articles of Organization at West Palm Beach, Florida, for the uses and purposes aforesaid, this 1st day of July, 2003.



Gregory L. Scott, Authorized Representative of the Members

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

COMPLEADS.COM, LLC

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

Gregory L. Scott
1645 Palm Beach Lakes Blvd.
Suite 1200
West Palm Beach, Florida 33401

Having been named as registered agent to accept service of process for the above-stated limited liability company, at the location designated herein, I hereby consent to and accept the appointment to act in this capacity, acknowledge that I am familiar with and accept the obligations of a registered agent and agree to comply with the laws of Florida applicable thereto.

Handwritten signature of Gregory L. Scott
Gregory L. Scott, Registered Agent

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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