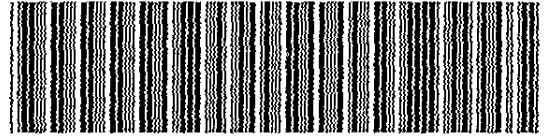


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STATE OF FLORIDA
TALLAHASSEE, FLORIDA



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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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LAW OFFICES OF DOMINICK J. SALFI, P.A.

ATTORNEYS AND COUNSELORS AT LAW

ATTORNEYS:
DOMINICK J. SALFI (FED BAR)

LEGAL ASSISTANTS:
GAYLE HAIR, C.L.A.
ANN CAMPBELL
SUSAN M. JOYNES

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03 SEP 24 AM 10:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

999 DOUGLAS AVENUE,
SUITE 3333
ALTAMONTE SPRINGS,
FLORIDA 32714-2063

TELEPHONE: 407.774.2700
FACSIMILE: 407.774.7308

INTERNET E-MAIL:
djs@salfi.com

WORLD WIDE WEB:
<http://www.salfi.com/>

FIRM ADMINISTRATOR
GAYLE HAIR, C.L.A.

LEGAL STAFF
KYLE HAIR
MICHELLE WHITE

September 22, 2003

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

RE: SPI ONE, L.L.C.

Gentlemen:

Enclosed herewith for filing is Articles of Organization of SPI ONE L.L.C. Also enclosed is our check in the amount of \$155.00 representing the filing fee, Designation of Registered Agent and Certified Copy.

Sincerely,


Dominick J. Salfi
ac

DJS/ac
Enclosures

ARTICLES OF ORGANIZATION
OF
SPI ONE, L.L.C.

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03 SEP 24 AM 10:4
OFFICE OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the limited liability company is:

SPI ONE, L.L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

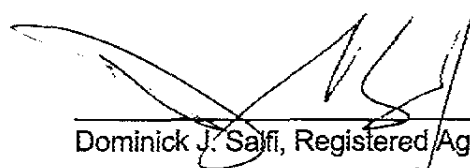
1648 Taylor Road, #115, Port Orange, FL 32128.

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

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

Dominick J. Salfi
999 Douglas Avenue, Suite 3333
Altamonte Springs, FL 32714.

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.



Dominick J. Salfi, Registered Agent

ARTICLE IV - Management

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

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.



Jean Lynd Norman, Member

FILED

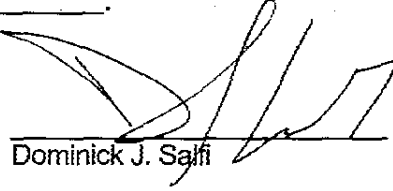
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**CONSENT TO
APPOINTMENT AS REGISTERED AGENT**

I, Dominick J. Salfi, accept the appointment as registered agent and state that I am familiar with and accept the obligations of the position.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DATED 9/17/03



Dominick J. Salfi