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(Cit	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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December 1, 2003

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

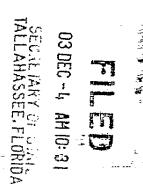
RE: Diverse Marketing Group, LLC

Dear Division of Corporations:

Enclosed please find an original and one (1) copy of the Articles of Organization in reference to the above-captioned matter. Please file and return the stamped copy back to me in the envelope provided. Also enclosed is a check in the amount of \$125.00 to cover the filing fees of the Articles.

Sincerely,

JK Harris and Company



TRANSMITTAL LETTER

SUBJECT: DIVEVSE Marketing Group, LLC (Name of Limited Liability Company)	
The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:	
Mark Christopher ayouh (Name of Person)	
(Firm/Company)	
2247 Citrus Blvd. #251 (Address) Leesburg, FL 34748 (City/State and Zip Code)	
For further information concerning this matter, please call: May K. C. Ayoub at 352, 343-700 (Area Code & Daytime Telephone Number)	T

STREET ADDRESS:

Registration Section
Division of Corporations

TO:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
Diverse Marketing Group, L	LC
ARTICLE II - Address: The mailing address and street address of the principal	office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2247 Citrus Blvd # 251	2247 Citrus Blvd #251
Leesburg, FL 34748	Leesburg, FL 34748
City, State, and Zip	orida agent are: 1 4 25 OT acceptable) ORIDA 341748
hoon named as registered agent and to accept service of t	process for the above stated limited liability

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, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

Name and Address:
Mark C. ayoub 2247 Citrus Blvd #251 Leesburg, FL 34748
Ās
30EC -4 A LAHASSEE,
be added if an effective date is requested.

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)

of this document constitutes an affirmation under the penalties of perjury

Typed or printed name of signee

that the facts stated herein are true.)