

Apr 07 04 10:34a

Jennifer Isaksen

813 354-748

Division of Corporations

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Florida Department of State
Division of Corporations
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To:
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Fax Number : (850)205-0383

From:
Account Name : ISAKSEN LAW FIRM
Account Number : I20040000059
Phone : (813)272-2007
Fax Number : (813)354-4748

LIMITED LIABILITY COMPANY

15 MINUTES OF FAME, LLC

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**ARTICLES OF ORGANIZATION FOR
15 MINUTES OF FAME, LLC**

The undersigned, for the purpose of forming a Limited Liability Company under the Florida Limited Liability Company Act, does hereby adopt the following Articles of Organization:

ARTICLE I

NAME OF COMPANY

The name of the Limited Liability Company is 15 MINUTES OF FAME, LLC.

ARTICLE II

MAILING ADDRESS OF COMPANY

The mailing address of the Limited Liability Company and of its principal office is: 610 Garrison Cove Lane, Tampa, Florida 33602.

ARTICLE III

INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Limited Liability Company is 610 Garrison Cove Lane, Tampa, Florida 33602 and the name of the initial registered agent at the address is JENNIFER ISAKSEN.

ARTICLE IV

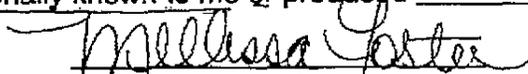
The Limited Liability Company is to be Manager-Managed.

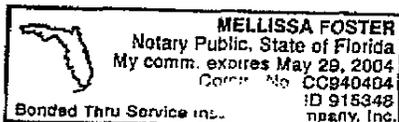
IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this April 7, 2004.


JENNIFER ISAKSEN

STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this April 7, 2004, by JENNIFER ISAKSEN, who is personally known to me or produced _____ for identification.


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CONSENT TO BE REGISTERED AGENT

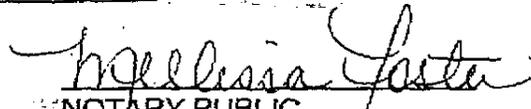
Following is the name and address of the initial registered agent of the limited liability company, 15 MINUTES OF FAME, LLC. Having been named as registered agent, the undersigned agrees and accepts said designation.

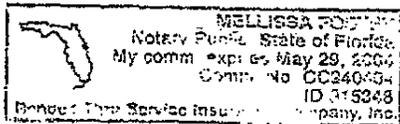
JENNIFER ISAKSEN
610 Garrison Cove Lane
Tampa, Florida 33602


JENNIFER ISAKSEN

STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this April 7, 2004, by JENNIFER ISAKSEN, who is personally known or produced _____ for identification.


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