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VICTORIA JAENSCH KARINS, P.A.

2206 JO AN DRIVE, SUITE 4 SARASOTA, FLORIDA 34231 (941) 927-2708 FAX (941) 929-9258

July 29, 2004

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE: Food For Performance, LLC

Dear Registration Section,

The enclosed Articles of Organization and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Victoria Jaensch Karins Victoria Jaensch Karins, PA 2206 Jo An Drive, Suite 4 Sarasota, FL 34231

For further information concerning this matter, please call me at 941-927-2708

Thank you for giving this submission your attention.

Sincerely.

Victoria Jaensch Karins

Attorney

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name: The name of the Limited Liability Company is:	
Food For Performance, LLC	
ARTICLE II – Address: The mailing address and street address of the princip	pal office of the Limited Liability company is:
Principal office address:	Mailing address:
2206 Jo An Drive	2206 Jo An Drive
Suite 4	Suite 4
Sarasota, FL 34231	Sarasota, FL 34231
ARTICLE III – Registered Agent, Registered Of The name and the Florida street address of the regis	tered agent are:
<u>Victoria Jaensch K</u> Name	AUG T
2206 Jo An Drive, s Florida street address (P.O. I	suite 4 Poy NOT accentable)
Sarasota, FL-3423 City, State, a	FIG • •

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 statues relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent as provided for in Chapter 608, Florida Statues.

Registered agent's signature

Page 1 of 2 (Continued)

ARTICLE IV	- Manager(s) or	Managing	Member(s):
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The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:	
MGRM	Sally Parsonage	
	19 commissioners Court	
	New Stairs, Chatham	
	Kent ME4 4H2, UK	

Required signature:

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the stated herein are true.)

Type or print name of signee

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