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TRANSMITTAL LETTER

TO:	Registration Section			
	Division of Corporations			
SUBJEC	CT: STARZ MODEL & TALENT STUDIO, L.L.C.			
	(Name of Limited Liability Company)			
The encl	osed Articles of Organization and fee(s) are submitted for filing.			
	Please return all correspondence concerning this matter to the following:			
H. JAMES LENTZ, ESQUIRE				
	(Name of Person)			
LENTZ & ASSOCIATES, P.A.				
	(Firm/Company)			
35095 U S 19 NORTH, SUITE 101				
	(Address)			
	PALM HARBOR, FLORIDA 34684			
	(City/State and Zip Code)			
For furth	er information concerning this matter, please call:			
WALTE	R H. SWEENEY at (727) 787-8700			
	(Name of Person) (Area Code & Daytime Telephone Number)			

STREET ADDRESS:
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:		
STARZ MODEL & TALENT STUDIO, L.L.C.		
ARTICLE II - Address: The mailing address and street address of the principal	office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
916 McMULLEN BOOTH ROAD	916 McMULLEN BOOTH ROAD	
CLEARWATER, FLORIDA 33759	CLEARWATER, FLORIDA 33759	
ARTICLE III - Registered Agent, Registered Office		
The name and the Florida street address of the registered	P. 04	
WILLIAM BAKER		
Name	SEP 27	
3205 MONTROSE CIRCLE		
Florida street address (P.O. Box N	OT acceptable) September 1997 OT acceptable) OT acceptable) OT acceptable)	
PALM HARBOR, FI City, State, and Zip	ORIDA 34684	
City, State, and Esp		

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)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
MGR	WILLIAM BAKER			
	3205 MONTROSE CIRCLE			
	PALM HARBOR, FL 34684			
MGRM	GEORGE MITSIS			
	2452 ENTERPRISE ROAD, APT. 2014			
	CLEARWATER, FLORIDA 33763			
MGRM	PATTY GLADDING			
	1317 DUNN SWAMP ROAD			
	POCOMOCE , MD 21851			
(Use attachment if necessary)				
NOTE: An additional article must be added if an effective date is requested.				
REQUIRED SIGNATURE:				
Wellan Bake				
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 facts stated herein are true.)

> WILLIAM BAKER Typed or printed name of signee

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)