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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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	ACCOUNT NO. : 072100000032
	REFERENCE: 932088 7458130
	AUTHORIZATION: Tatricia typuto
	COST LIMIT: \$ 125.00
ORDER	DATE: October 18, 2004
	TIME : 2:28 PM
	NO.: 932088-005
	MER NO: 7458130
CUSTOM	
	6409 Wellilngton Drive
	Orlando, FL 32819
	DOMESTIC FILING
	NAME: AFFINITY GROUP PARTNERS L.L.C.
	EFFECTIVE DATE:
	ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION
<u>XX</u>	
	RETURN THE FOLLOWING AS PROOF OF FILING:
	RETURN THE FOLLOWING AS PROOF OF FILING:  CERTIFIED COPY  PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

Affinity Group Partners 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:	
47 Hicks Street, Suite 3R	47 Hicks Street, Suite 3R
Brooklyn, NY 11201	Brooklyn, NY 11201

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

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

Nas	nc
6409 Wellington Drive	e
Florida street address (	P.O. Box <u>NOT</u> acceptable)
Orlando	FLORIDA 32819

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..

David Bayer

By:

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: Name and Address:

GR	David Bayer
_	6409 Wellington Drive
-	Orlando, Florida 32819 .
R	Kamuti Kiteme
	47 Hicks Street, Suite 3R
	Brooklyn, NY 11201
se attachment if necessary)	

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 facts stated herein are true.)

Daino R. Rayer Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

S 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)