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VISION OF CORPORATION

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From:

Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number : I20010000247 Phone : (800)494-3124 Fax Number : (305)675-2811

LIMITED LIABILITY COMPANY

SMACK LLC

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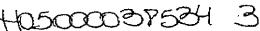
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Corresponds, Hillians

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

SMACK LLC

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

2 RUSTIC GATE LANE DIX HILLS, NY 11746

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

JONATHAN FLAX 1631 BREAKERS WEST BLVD. WEST PALM BEACH, FLORIDA 33411

Having been named as registered agent 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 all statutes relating to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

JONATHAN FLAX / Registered Agent's Signature

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ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS (optional)

The name(s), address(es), and title(s) of the directors and officers:

Managing Member:

JONATHAN FLAX **2 RUSTIC GATE LANE** DIX HILLS, NY 11746

Managing Member:

LARRY ALPER **6 WHITNET COURT** DIX HILLS, NY 11746

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.)

JONATHAN FLAX Typed or printed name of signee

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