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LIMITED LIABILITY COMPANY

Business Concepts USA LLC

Certificate of Status	0
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**ARTICLES OF ORGANIZATION
OF
Business Concepts USA LLC**

ARTICLE I NAME

The name of the limited liability company shall be: **Business Concepts USA LLC**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 15704 Ibisridge Drive, Lithia, Florida 33547.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Robert Shear, 132 E Bloomingdale Rd Suite B, Brandon, Florida 33511. Located in the County of Hillsborough.


ARTICLE IV DURATION

The duration for the limited liability company shall be: 12/31/2045.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the name and address of the member of the Limited Liability Company is:

Terry McCombs, 1713 Avenue D, Sterling, Illinois 61081


Business Filings Incorporated, Organizer
Mark Schiff, AVP
Authorized Representative

Prepared by Mark Schiff, Business Filings Incorporated, 8025 Excelsior Dr. Suite 200,
Madison, WI 53717
(608) 827-5300

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FAX AUDIT # 40500088324 3CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: **Business Concepts USA LLC**

The name and address of the registered agent and office is Robert Shear, 132 E Bloomingdale Rd Suite B, Brandon, Florida 33511. Located in the County of Hillsborough.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature: _____


Robert Shear

Date: March 30, 2005

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