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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BRADLEY W. HOGREVE, P.A.

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Sarasota, Florida 34237-6043

BRADLEY W. HOGREVE
Board Certified Real Estate Attorney

Telephone (941) 951-7700
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June 27, 2005

Division of Corporations
Secretary of State
4099 E. Gaines Street
Tallahassee, FL

VIA FEDERAL EXPRESS


Re: Bucks County Custom Cycles of Sarasota, LLC
Bucks County Custom Cycles Holdings of Sarasota, LLC

Dear Sir/Madam:

Enclosed you will find Articles of Organization for the above referenced limited liability companies. I am also enclosing two checks in the amount of \$125.00 each to cover the filing fee. Please forward the confirmation letter to our office in the enclosed Federal Express envelope.

If you have any questions, please do not hesitate to call me.

Sincerely,


Kathy Zampella
Legal Assistant

klz
Enclosures

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: BUCKS COUNTY CUSTOM CYCLES OF SARASOTA, LLC.

ARTICLE II - Address:

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

Principal Office Address:

5307 Avenida Del Mare
Sarasota, FL 34242

Mailing Address:

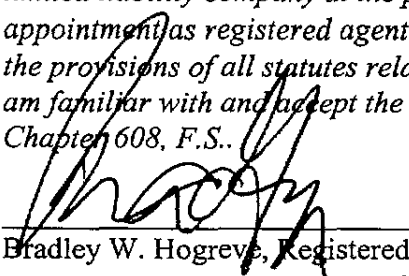
5307 Avenida Del Mare
Sarasota, FL 34242

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

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

Bradley W. Hogreve
100 Wallace Avenue, Suite 310
Sarasota, FL 34237

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, F.S..


Bradley W. Hogreve, Registered Agent

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

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

Title:

MANAGER/MEMBER

Name and Address:

JASON E. HEROUX
5307 Avenida Del Mare, Sarasota, FL 34242

MEMBER

DEAN BIANCHINI
922 Chesterfield Dr., Lower Chesterfield, PA 19002

MEMBER

ALLAN D. LAIRD
P.O. Box 94, Stockton, NJ 08559

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TALLAHASSEE, FLORIDA

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MEMBER

GREGORY PAPPAS
4241 Park Avenue, Slatington, PA 18080

MEMBER

JOHN RAFETTO
1863 Valley Forge Road, Allentown, PA 18104

MEMBER

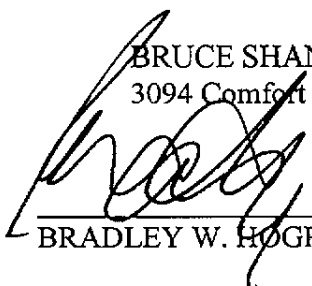
SALVATORE SALVAGNO
33 Rock Creek Woods, Lambertville, NJ 08530

MEMBER

ALAN SHANKIN
411 Fairview Way, New Hope, PA 18938

MEMBER

BRUCE SHANKIN
3094 Comfort Road, New Hope, PA 18938



BRADLEY W. HOGREVE, authorized representative

(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.)

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