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FLORIDA/FOREIGN LIMITED LIABILITY CO

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IVISION OF CONPORATION

KKE, LLC

Certificate of Status	0
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FAX AUDIT # HOLOCOL 75 x43

ARTICLES OF ORGANIZATION OF KKE, LLC

ARTICLE I

NAME

The name of the limited liability company shall be: KKE, LLC

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 3053 Genoa Lane, Jupiter, Florida 33477.

ARTICLE III

INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Catherine Vequist, 3053 Genoa Lane, Jupiter, Florida 33477. Located in the County of Palm Beach.

ARTICLE IV

DURATION

The duration for the limited liability company shall be: 12/31/2046.

ARTICLE V

MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the names and addresses of the members of the Limited Liability Company are:

Cathy Vequist, 3053 Genoa Lane, Jupiter, Florida 33477 Terry Barrett, 3053 Genoa Lane, Jupiter, Florida 33477

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

HOUNDINGSOUS FAX AUDIT#

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CERTIFICATE 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: KKE, LLC

The name and address of the registered agent and office is Catherine Vequist, 3053 Genoa Lane, Jupiter, Florida 33477. Located in the County of Palm Beach.

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:

Cathorino Vernist

Date: 7 1/2/06