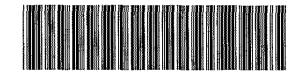
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OF AUG 30 PM 3: 25

W06-35503

J. BRYAN

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206A.53177

# TRANSMITTAL LETTER

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

RE: Incentive & Exhibit Services, LLC

Enclosed are the articles of organization and a check for Incentive & Exhibit Services, LLC

\$ 100.00 filing fee for articles of organization.
 25.00 designation of registered agent.
 \$ 125.00 total

Carolyn Kiss 1814 Tappan Blvd. Tampa, FL 33619 \_ 813.623.1163 DIVISION OF CORPORATIONS OF AUG 30 PM 3: 25

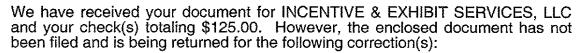


August 11, 2006

CAROLYN KISS 1814 TAPPAN BLVD. TAMPA, FL 33619

SUBJECT: INCENTIVE & EXHIBIT SERVICES, LLC

Ref. Number: W06000035503



Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Letter Number: 606A00049952

Joey Bryan Document Specialist DIVISION 30 PM 3: 25

ARTICLES OF ORGANIZATION
OF
INCENTIVE & EXHIBIT SERVICES, LLC

The undersigned registered agent, for the purpose of forming a limited liability company under Chapter 608, F.S., adopts the following Articles of Organization.

# ARTICLEI

NAME

The name of the limited liability company shall be: Incentive & Exhibit Services, LLC

# **ARTICLE II**

#### PRINCIPAL OFFICE

The principal place of business and mailing address of this limited liability company shall be:

1814 Tappan Blvd Tampa, FL 33619

#### ARTICLE III

# REGISTERED AGENT AND STREET ADDRESS

The name and address of the registered agent is: Carolyn Kiss, of 1814 Tappan Blvd, Tampa, FL 33619

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 related 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.

Carolyn Kiss Registered Agent

# **ARTICLE IV**

## MANAGER MEMBERS

The name and address of MGRM is: Jutta E. Ramsower, of 1814 Tappan Blvd, Tampa, FL 33619

The name and address of MGRM is: Carolyn Kiss, of 1814 Tappan Blvd, Tampa, FL 33619

(In accordance with section 608.408(3), F.S.) the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Carolyn Kiss Manager, Member SECRETARY OF STATIONS
DIVISION OF CORPORATATIONS
OF NIG 30 PM 3: 25