

Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

To whom it may concern:

Enclosed you will find my application for a Limited Liability Company. Please contact me at (954) 234-5333 or (954) 345-6620 during the day if necessary. My mailing address is 1393 NW 100 Avenue, Coral Springs, Florida, 33071.

Thank you.

W99-12943

Sincerely,

Jeffrey T. Romance

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P.S. PLEASE SEND ME ACERTIFIED COPY!

99 JUN 17 PH 3: 04
SECRETARY STATE
AND ANASSEE FLORIDA



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 3, 1999

JEFFREY T. ROMANCE 1393 NW 100 AVENUE CORAL SPRINGS, FL 33071

SUBJECT: DIGEST PUBLISHING Ref. Number: W99000012943

We have received your document for DIGEST PUBLISHING and your check(s) totaling \$337.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "L.C." or "L.L.C."

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) 487-6958.

Letter Number: 799A00030261

Lee Rivers Document Specialist

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

DIGEST PUBLISHING L.C.

ARTICLE II - Address:

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

934 NORTH UNIVERSITY #202 CORALBPRINGS, FL 33071

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

PERPETUAL

ARTICLE IV - Management: (Check the appropriate box and complete the statement)

The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

JEFFREY ROMANCE
1393 NW 100 AVE
CORAL SPRINGS, FL
33071

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

ARTICLE V - Admission of Additional Members:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be: ν

ARTICLE VI - Members Rights to Continue Business:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

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ARTICLE VII - Affidavit of Membership and Contributions

The undersigned member or authorized representative of a member of	
DIGEST PUBLISHING L.C. ce	rtifies:
 the above named limited liability company has at least one member; the total amount of cash contributed by the member(s) is 	\$ D
 3) if any, the agreed value of property other than cash contributed by member(s) is (A description of the property is attached and made a part hereto.); and 4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is 	s — — — — — — — — — — — — — — — — — — —
Signature of a member or an authorized representative of a mem (In accordance with section 608.408(3), Florida Statutes, the execution of affidavit constitutes an affirmation under the penalties of perjury that the stated herein are true.)	This has seen a
JEFFREY THOMAS ROMANCE Typed or printed name of signee	3: 04 STATE LORIB

Filing Fee: \$250.00 for Articles and Affidavit

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The	name of the limited liability company is:	
	DIGEST PUBLISHING L.C.	· · · · · · · · · · · · · · · · · · ·
2. The:	name and the Florida street address of the registered agent are:	SECRETARIASSEE FLI
	[393 NW [00 AV E] Florida street address (P. O. Box NOT ACCEPTABLE)	O4 RATE PRIBA
	CORAL SPRINGS, FL 33071	en e
	CITY, STATE AND ZIP	

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.

SIGNATURE

Filing Fee: \$ 35 for Designation of Registered Agent