## LU5000101933

(Requestor's Name)
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PICK-UP WAIT MAIL
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(Business Entity Name)
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THAT CHASSEE, FLORIDA

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ACCOUNT NO. : 07210000032
REFERENCE : 653560 4321061
AUTHORIZATION: atricia quit
COST LIMIT: \$ 125.00
ORDER DATE: October 14, 2005
ORDER TIME: 4:50 PM
ORDER NO. : 653560-005
CUSTOMER NO: 4321061
DOMESTIC FILING
NAME: ECI FLORIDA, LLC
EFFECTIVE DATE:
XX ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
XX PLAIN STAMPED COPY
CONTACT PERSON: Cindy Harris - EXT. 2937
EXAMINER'S INITIALS:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FLORIDA LIMITED L	IABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	IABILITY COMPANY  RECEIVED TO THE PARTY OF T
ECI Florida, LLC	7
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company
Principal Office Address:	Mailing Address:
2700 Delk Road, Suite 100	same
Marietta, GA 30067	
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the re	
Corporation Service Com	pany
Name	•
1201 Hays Street	
Florida street address (P.O.	. Box NOT acceptable)
Tallahassee	FLORIDA 32301
City, State, at	nd 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 as provided for in Chapter 608, Florida Statutes..

Corporation Service Company

By: Cynthia L. Harris

as its agent

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managin	g Member
MGR	Seth Greenberg
· · · · · · · · · · · · · · · · · · ·	2700 Delk Road, Suite 100
	Marietta, GA 30067
<del> </del>	
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	A STATE OF THE STA
(Use attachment if ne	cessary)
NOTE: An addition	al article must be added if an effective date is requested.
DECTIDED SICNA	TIDE.
REQUIRED SIGNA	TORE:
	Jen Alem
	of a member or an authorized representative of a member.
_	•
	lance with section 608.408(3), Florida Statutes, the execution cument constitutes an affirmation under the penalties of perjury
	cts stated herein are true.)
Der	Was Nhannow
By:	Vera Abramova Typed or printed name of signee
	-7k kranea manea a a-8ma

Filing Fees:
\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)