

Division of Corporations

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**Florida Department of State**  
**Division of Corporations**  
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**To:**

Division of Corporations  
 Fax Number : (850) 617-6383

**From:**

Account Name : STEARNS WEAVER MILLER WEISSLER ALHADEF & SITTERSON, P.A.  
 Account Number : 120060000135  
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SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**LAUREL GP LLC**

|                       |          |
|-----------------------|----------|
| Certificate of Status | 1        |
| Certified Copy        | 1        |
| Page Count            | 02       |
| Estimated Charge      | \$160.00 |

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**ARTICLES OF ORGANIZATION  
OF  
LAUREL GP LLC  
(a Florida Limited Liability Company)**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Florida Statutes Chapter 608, as amended, hereby makes, acknowledges and files the following Articles of Organization.

**ARTICLE I  
NAME**

The name of the limited liability company is Laurel GP LLC (the "Company").

**ARTICLE II  
ADDRESS**

The mailing address and street address of the principal office of the Company is to Gatchouse Group, Inc., 120 Forbes Boulevard, Mansfield, Massachusetts 02048.

**ARTICLE III  
DURATION**

The period of duration for the Company shall be perpetual.

**ARTICLE IV  
REGISTERED OFFICE AND AGENT AND ADDRESS**

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

Name

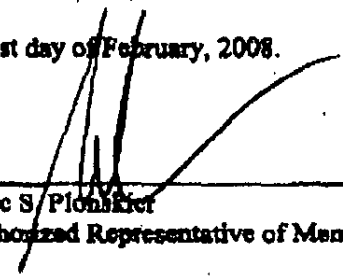
Address

Terry M. Lovell

2200 Museum Tower  
150 West Flagler Street  
Miami, Florida 33130

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IN WITNESS WHEREOF, the undersigned has made and subscribed these Articles of  
Organization for the foregoing uses and purposes this 21st day of February, 2008.

  
\_\_\_\_\_  
Marc S. Plonkier  
Authorized Representative of Member

**ACCEPTANCE OF  
REGISTERED AGENT**

Having been named as registered agent and to accept service of process for Laurel GP LLC 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.

  
\_\_\_\_\_  
Terry M. Lovell, Registered Agent

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