

Florida Department of State
Division of Corporations
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Katherine Harris, Secretary of State

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To:

Division of Corporations
Fax Number : (850) 922-4003

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 541-3694
Fax Number : (305) 541-3770

00 JAN 11 PM 12:00

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

LIMITED LIABILITY COMPANY

SW INTERACTIVE, L.L.C

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

January 10, 2000

EMPIRE CORPORATE KIT COMPANY

SUBJECT: SW INTERACTIVE, LLC
REF: W00000000674

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document must contain the entity's complete mailing address.

The registered agent must sign accepting the designation.

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

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TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION
OF
SW INTERACTIVE, L.L.C.**

00 JUN 11 PM 12:00
SW INTERACTIVE, L.L.C.

FIRST: The name of the limited liability company is SW Interactive, L.L.C.

SECOND: The county within this state in which the office of the limited liability company is to be located is: Duval. 101 E. Union St., Suite 303, Jacksonville, FL 32202

THIRD: The limited liability is to continue perpetually.

FOURTH: The name and street address within this state of the registered agent of the limited liability company upon whom and at which process against the limited liability company can be served is: Wilene Dozier, 101 E. Union Street, Suite 303, Jacksonville, Florida 32202.

FIFTH: The limited liability company is to be managed by 1 or more members.

IN WITNESS WHEREOF, this certificate has been subscribed this 11th day of June, 2000, by the undersigned who affirms that the statements made herein are true under the penalties of perjury.

Wilene Dozier
Signature

Wilene Dozier, Organizer
(name and capacity of signer)

CONSENT OF REGISTERED AGENT

Having been named as Registered Agent and to accept service of process for the above-stated corporation at the place designated in the 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 am familiar with and accept the obligations of my position as Registered Agent.

Wilene D. Dozier
Wilene D. Dozier

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