

L000000000/631



ACCOUNT NO. : 072100000032

REFERENCE : 580822 81793A

AUTHORIZATION :

*Patricia Pizeto*

COST LIMIT : \$ 125.00

ORDER DATE : February 8, 2000

ORDER TIME : 9:43 AM

ORDER NO. : 580822-005

000003133790--0

CUSTOMER NO: 81793A

CUSTOMER: Mr. Glenn Cooper  
BECKER & POLIAKOFF, P.A.  
BECKER & POLIAKOFF, P.A.  
Suite 100  
5201 Blue Lagoon Drive  
Miami, FL 33126

DOMESTIC FILING

NAME: SANDTRADE COMMUNICATION,  
LLC

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION  
       CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Angie Glisar

EXAMINER'S INITIALS:

*JB*  
*2-14-00*

RECEIVED  
FEB 14 2000  
STATE  
TALLAHASSEE, FLORIDA

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

SANDTRADE COMMUNICATION, LLC

## ARTICLE II - Address:

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

5201 Blue Lagoon Dr., Suite 100, Miami, FL. 33126

## ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

|   |           |              |
|---|-----------|--------------|
| <u>Corporation Service Company</u>                      |           |              |
| <u>Name</u>   |           |              |
| <u>1201 Nays Street</u>                                 |           |              |
| <u>Florida street address (P.O. Box NOT acceptable)</u> |           |              |
| <u>Tallahassee,</u>                                     | <u>FL</u> | <u>32301</u> |
| <u>City, State, and Zip</u>                             |           |              |

*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, F.S..*

*Sessie Hall*

Registered Agent's Signature

## Article IV - Management (Check box if applicable.)

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Glenn Cooper  
Signature of a member or an authorized representative of a member.

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

Glenn Cooper  
Typed or printed name of signer

### 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)

00 FEB 11 11:36  
FILED  
TALLAHASSEE FLORIDA