L000000009449

Member/Manager
ALTIVA TELECOM SOLUTIONS, LLC
5025 Ashley Lake Drive, Apt. 2-15
BOYNTON BEACH, FLORIDA 33437-3114

(561) 375-9563 CONTACT NUMBER

August 7, 2000

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FLORIDA SECRETARY OF STATE'S OFFICE

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

- I am very interested in applying twenty-five plus years of Telecommunications Wide Area Networking design engineering experience as a Senior Network Infrastructure Consultant.
- Have worked as a Consultant for Data/Voice Network Design and Network Infrastructure with major Telecommunications Carriers.
- Implementation experience with Competitive Local Exchange Carriers.
- My major strengths are in state of the art complex data networking application development.
- I would like to meet with the responsible manager to discuss what areas I may help clients business objectives.
- My resume will be forwarded upon request for your complete review if required.
- My professional references will be promptly forwarded upon your request when required.
- My services are currently available to end user clients and network service providers-ISPs,
 Local Telecommunications Companies, Long Distance Companies at this time.

I am filing for business status a Data Networking & Telecommunications Consultant.

Thank you for your cooperation.

ALTIVA TELECOM SOLUTIONS, LLC

TAX ID/EIN: 54-1952183

William E. Wilson, Jr.

Member/Manager

My 817

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SECTEMBER OF STAIL

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ALTIVA TELECOM SOLUTIONS, LLC

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

ARTICLE I - Name:

ARTICLE II - Address:

The name of the Limited Liability Company is:

5025 ASHLEY LAKE DR., APT. 2-15 BOYNTON BEACH, FLORIDA 33437-3114	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signatur	e:
The name and the Florida street address of the registered agent are:	
WILLIAM E. WILSON, III. Name	س
Florida street address (P.O. Box NOT acceptable) BOYNTON BEACH, FLOREDA 33437-3114 City, State, and Zip	10± 444
Having been named as registered agent and to accept service of process for the above state liability company at the place designated in this certificate, I hereby accept the appointme registered agent and agree to act in this capacity. I further agree to comply with the provestatutes relating to the proper and complete performance of my duties, and I am familiar vaccept the obligations of my position as registered agent as provided for in Chapter 608, I Registered Agent's Signature	nt as isions of all vith and
Article IV - Management (Check box if applicable.)	rs and is
The Limited Liability Company is to be managed by one manager or more manager	-··-
therefore, a manager - managed company.	8 E
(An additional article must be added if an effective date is requested)	0 19 19 19 19 19 19 19 19 19 19 19 19 19
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.)	PM 5: 05
WILLIAM E. WILSON, JR. Typed or printed name of signee	5

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)