

LO1000001869

DRAPER & BOYD, P.A.
Certified Public Accountants
P.O. Box 1149
Keystone Heights, FL 32656
(352) 473-3360

January 30, 2001

Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

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-02/02/01--01122--010
****125.00 ****125.00

Dear Ladies or Gentlemen:

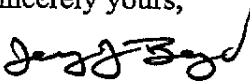
Please find enclosed the Articles of Organization for Florida Limited Liability Company for East Coast Splicing, L.L.C. The Company's address and phone number is as follows:

PO Box 751
Keystone Heights, FL 32656
Phone: 352-219-3129

A check is enclosed in the amount of \$125.00 for filing fees and designation of Registered Agent.

Please contact the Registered Agent or me if additional information is needed.

Sincerely yours,


Jerry J. Boyd CPA

FILED
01 FEB -2 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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OK
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DRAPER AND BOYD

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

EAST COAST SPLICING, L.L.C.

ARTICLE II - Address:

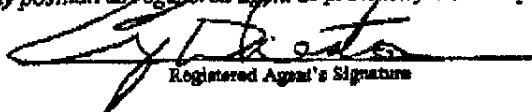
The mailing address and street address of the principal office of the Limited Liability Company is:

MAILING: PO BOX 751
KEYSTONE HEIGHTS, FL 32656STREET: 298 LAWRENCE BLVD.
KEYSTONE HEIGHTS, FL 32656**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

CRAIG M. WHEATON
Name
298 LAWRENCE BLVD.
Florida street address (P.O. Box NOT acceptable)
KEYSTONE HEIGHTS FL 32656
City, State, and 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, F.S.


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.

ARTICLE V- The effective date of the Limited Liability Company is January 29, 2001.

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


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.)

CRAIG M. WHEATON

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)

FILED
01 FEB -2 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA