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ACCOUNT	NO.	:	0721	000	00032
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REFERENCE: 2242

COST LIMIT : \$ 125.00

ORDER DATE: July 17, 2001

ORDER TIME : 12:03 PM

ORDER NO. : 224276-005

CUSTOMER NO: 7219014

Mr. John P. Crecine Mr. John P. Crecine

3030 N.e. 23rd Court

Fort Lauderdale, FL 33305

DOMESTIC FILING

ISLANDLESS NETWORK, LLC

EFFECTIVE DATE:

XX \_\_ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX \_\_ CERTIFIED COPY

−nÂME:

CONTACT PERSON: Norma Hull - EXT. 1115

EXAMINER'S INITIALS:

200004486672--9.

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

ISLANDLESS NETWORK, LLC

## **ARTICLE II - Address:**

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

3030 N.E. 23RD COURT, FORT LAUDERDALE, FLORIDA 33305

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

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

Corporation Service Company					
Name					
1201 Hays Street					
Florida street address (P.O. Box NOT acceptable)					
Tallahassee FL 32301					
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..

Corporation Service Company

By:

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.	s and is,	
therefore, a manager - managed company.	SECRE FALL AH	). :
(An additional article must be added if an effective date is requested)	TARY ASSEE	
Signature of a member or an authorized representative of a member.		803
(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.)	M 3: 10 OF STATE FLORIDA	. # . #
LAURA R. DUNLAP		
Typed or printed name of signee	-	,

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)

# MEMBERS OF:

# ISLANDLESS NETWORK, LLC

Robert P. Crecine Managing Member

John P. Crecine Member 3105A Eastlake Avenue, East Suite A Seattle, Washington 98102

- 3030 N.E. 23rd Court Fort Lauderdale, Florida 33305

OI JUL 19 PM 3: 10
SECRETARY OF STATE
TALLAHASSEF, FI ORIDA

APPRUVEL.

954-563-5037 FAX:8505211010

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FILE No. 688 07/17 '01 12:50 ID:CSC TPLLAHOSSEE

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# LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of ISLAMILESS RETURNS, LLC

the "LLC"), a Florida limited limbility company, for the farther purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted heathy shall be exercisable and effective upon execution of the Limited Power of Attorney by the underrigned and upon delivery of the original or a copy thereof by factimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Amothey may only upon it and the exercise of the limited power granted herein without making further incomy as in the matters described herein or the authority of CSC to act hereunder.

This Limited Power of Attorney is executed on this

Signature

Vohn P. Crecine

Print Name of Signer

VTTÝESS:

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Print Name of Winess

Milbros

Signature

Die Name of Witness

OI JUL 19 PM 3: 10 SECRETARY OF STATE

PLULED-LIMITED FOWER OF ATTORNEY SHOO (FLILEATT)