

**201000013115****Florida Department of State**

Division of Corporations

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**To:**

Division of Corporations  
Fax Number : (850) 205-0383

**From:**

ASTRID BUTTARI, Legal Assistant

Account Name : AKERMAN, SENTERFITT & EIDSON, P.A.  
Account Number : 075471001363  
Phone : (305) 374-5600  
Fax Number : (305) 374-5095

**LIMITED LIABILITY COMPANY****ZOOM NORTH AMERICA, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

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**ARTICLES OF ORGANIZATION**

**FOR**

**ZOOM NORTH AMERICA, LLC**

**ARTICLE I - Name:**

The name of the Limited Liability Company is: ZOOM NORTH AMERICA, LLC.

**ARTICLE II - Address:**

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

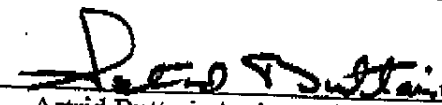
5300 N.W. 114th Avenue  
Suite 101  
Miami, Florida 33178

**ARTICLE III - Registered Agent, Registered Office and Acceptance by Registered Agent:**  
The name and the Florida street address of the registered agent are:

American Information Services, Inc.  
One S.E. Third Avenue, 28th Floor  
Miami, Florida 33131


*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.*

AMERICAN INFORMATION SERVICES, INC.

By:   
Astrid Buttari, Assistant Secretary

**Article IV - Management**

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

  
MICHAEL FRANCIS,  
authorized representative of the sole member

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