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Aaron Hume 3902 NW 58mct. Mami, FC. 33166

Office Use Only

Examiner's Initials

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1	(Document #) 2000047343627
(Corporation Name)	-12/20/0101049803 ****160.00 ****160.00
2. (Corporation Name)	(Document #)
3(Corporation Name)	(Document #) SECRET
4(Corporation Name) Walk in Pick up time _ Mail out Will wait	(Document #) Certified Copy P Photocopy Certificate of Status
NEW FILINGS	<u>AMENDMENTS</u>
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS Annual Report Fictitious Name	REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement
	Trademark Other

CR2E031(7/97)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION FOR FLORIDAL LIVIT ED LIABILIT I
ARTICLE I - Name: The name of the Limited Liability Company is: Electronic Communications, LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Mailing address: P. O. Box 267700, Weston, FL 33326 Street address: 3902 Northwest 58th Court, Miami, FL 33166 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Aaron C. Hume Name
. IASTING
3902 Northwest 58th Court
Florida street address (P.O. Box NOT acceptable)
Miami <u>FL 33166</u>
City, State. and Zip
Having been named as registered agent and to accept see the appointment as liability company at the place designated in this certificate, I hereby accept the appointment as liability company at the place designated in this capacity. I further agree to comply with the provisions of all 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 statutes relating to the proper and complete performance of my duties, and I am familiar with and statutes relating to the proper and complete performance of my duties, and I am familiar with and statutes relating to the proper and complete performance of my duties, and I am familiar with and statutes relating to the proper and complete performance of my duties, and I am familiar with and statutes relating to the proper and complete performance of my duties, and I am familiar with and statutes relating to the proper and complete performance of my duties, and I am familiar with and statutes relating to the proper and complete performance of my duties.
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) Signature of a member or an authorized representative of a member. (In accordance with section 508.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
Typed or printed name of signee
Fitting France

Filing Facs:
\$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)