(1202000001581

1218 Woodridge Ct. Altamonte Springs, FL 32714

Registration Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Dear Sir,

Please find the forms & fees for Articles of Organization, for Telecom Access Group.

Elvin R. Matthews 1218 Woodridge Ct. Altamonte Springs, FL 32714 Tel: 407 290-9397

000004781710--1 -01/17/02--01041--010 ****125.00 ****125.00

Sincerely,

Elvin R. Matthews

PILED

02 JAN 17 PM 3: 5:
SECRETARY OF STATE
TALLAHASSEE, FI OPIN

102-1581

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Telecom Access Group, LLC	
ARTICLE II - Address:	
The mailing address and street address of the principal office of the Limited Liability Company is:	
1218 Woodridge Ct.	
A †amon † & Springs FL 32714 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:	
The name and the Florida street address of the registered agent are:	
Elvin Matthews	
Elvin Matthews 1218 Woodridge Ct.	. •
Florida street address (P.O. Box <u>NOT</u> acceptable) A Hamon's Sps. FL 327/4 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.	
XIII Mattern	
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	
therefore, a manager - managed company.	
ASS.	7
(An additional article must be added if an effective date is requested)	<u>-</u> -
X Elvin Matthews	j
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 periury	
that the facts stated herein are true.)	
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)