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Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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| | | | *****70.00 | *****70.00 | |
|----------------------------------------------------------------------------|-----------------------------------------|--------------------------------|---------------------------------|-----------------------------|--|
| SUBJECT: | Dominicom LLC | | | | |
| | (PROPOSED CORPORA | TE NAME – <u>MUST INCL</u> | UDE SUFFIX) | - | |
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| | | | 100004781 | | |
| | | | -02/15/02 *****55.00 | | |
| Enclosed are ar | n original and one (1) copy of the arti | cles of incorporation and | a check for: | | |
| ጃ \$70. | .00 🗖 \$78.75 | | | | |
| Filing F | * * * * * * * * * * * * * * * * * * * * | \$78.75 | \$87.50 | | |
| ı mıngı | & Certificate of Status | Filing Fee & Certified Copy | Filing Fee, | | |
| | of our states | ac Confined Copy | Certified Copy & Certificate of | | |
| | | | Status 2 | a es | |
| | | ADDITIONAL CO | |] N | |
| | | | | j 8 | |
| FROM: John M. Popson | | | | | |
| \ _ | Name (| Printed or typed) | | FILED 02 FEB 5 PM 2: 40 | |
| 70 | ~ OK | | | , di | |
| 15,0 | 156 Brooks | ide Court | | 1 | |
| Address | | | | | |
| 156 Brookside Court Address Palm Harbon FT 34683 | | | | | |
| Palm Harbor, FI, 34683 City, State & Zip | | | | | |
| 100 | • | • | | | |
| (727) 781-5491 | | | | | |
| (727) 781-5491 Daytime Telephone number (727) 864-3300 ext-6887 101 3124 | | | | | |
| (727) 864-3300 add | | | | | |
| | ext. 68 | 00m W | | | |
| 2124 | | | | | |
| | | √0 / | <u>_</u> ^ ^ | | |
| NOTE: Please provide the original and one copy of the articles. | | | | | |
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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 6, 2002

JOHN M. POPSON 156 BROOKSIDE COURT PALM HARBOR, FL 34683

SUBJECT: DOMINICOM LLC Ref. Number: W02000003459

We have received your document for DOMINICOM LLC and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

As stated in our telephone conversation of today's date, you must submit articles of organization and an additional \$55.

If you have any questions concerning the filing of your document, please call (850) 245-6911.

Brenda Tadlock Sr. Corporate Section Administrator

Letter Number: 302A00007293



Ms. HARVEY -Brenda in your department told me to send the attached to your attention. Please process it ASAP. I had filed it originally As A Regular corporation and paid the \$70.00 filing fee, A check for the #55,00 balance is attached. Planse call me at (727) 864 - 3300, ext. 6887 with John M, Jopen any questions.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Dominicom LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 156 Brookside Court

Palm Harbor, FL 34683

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

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

| John M. Popson | | | | |
|--------------------------------------------------|-------|--|--|--|
| Name | | | | |
| | | | | |
| 156 Brookside Court | ; | | | |
| Florida street address (P.O. Box NOT acceptable) | | | | |
| Palm Harbor FL | 34683 | | | |
| 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 therefore, a manager - managed company.

(An additional article must be added if anyeffective 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.)

John M. Popson

Typed or printed name of signes

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

S 5.00 Certificate of Status (Optional)