



LO2000004019

ACCOUNT NO. : 072100000032

REFERENCE : *385774 Patricia Pizate*

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE : February 14, 2002

ORDER TIME : 9:48 AM

ORDER NO. : 385774-005

CUSTOMER NO: 7107131

600004961176--1

CUSTOMER: Mr. Don Pelersi
Telecommunications Analysis
Group
12 Elmwood Road

Manands, NY 12204

DOMESTIC FILING

NAME: CISTANT, LLC

EFFECTIVE DATE:

☐ ARTICLES OF INCORPORATION
☐ CERTIFICATE OF LIMITED PARTNERSHIP
☒ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea - EXT. 1114

EXAMINER'S INITIALS:

DIVISION OF CORPORATION

02 FEB 20 AM 10:47

RECEIVED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 FEB 20 PM 12:41

APPROVED
AND
FILED

[Handwritten signature]

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CISTANT, LLC

ARTICLE II - Address:

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

12 ELMWOOD ROAD, MENANDS, NEW YORK 12204

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: Deborah D. Skipper Deborah D. Skipper
Registered Agent's Signature Asst. V. Pres.

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)

Don Pelersi
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.)

DON PELERSI
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)

02 FEB 20 PM 12:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
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