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AUTHORIZATION :

Patricia Pyjunt

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02 MAY -6 AM 9:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : May 6, 2002

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ORDER NO. : 566892-005

CUSTOMER NO: 98373A

CUSTOMER: C. Christian Sautter, Esq
Seiler & Sautter

Suite 200
2900 East Oakland Park Blvd.
Fort Lauderdale, FL 33306

RECEIVED
02 MAY -6 PM 4:28
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: OMNE GROUP, LLC

700005464327--8

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Deborah Schroder - EXT. 1118

EXAMINER'S INITIALS: _____

**ARTICLES OF ORGANIZATION
OF
OMNE GROUP, LLC**

FILED
02 MAY -6 AM 10:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby makes, acknowledges, and files the following Articles of Organization.

ARTICLE I -- NAME

The name of the limited liability company shall be OMNE GROUP, LLC ("Company").

ARTICLE II -- ADDRESS

The mailing address and street address of the principal office of the Company shall be 25 Braintree Hill Office Park, Braintree, Massachusetts 02110.

ARTICLE III -- DURATION

The Company shall commence its existence on the date these articles of organization are filed by the Florida Department of State. The Company's existence shall be for a period of thirty (30) years from the date of filing of these articles of organization.

ARTICLE IV -- REGISTERED OFFICE AND AGENT

The name and street address of the registered agent of the Company in the State of Florida is C. Christian Sautter, Esq., Seiler & Sautter, 2900 East Oakland Park Boulevard, Suite 200, Fort Lauderdale, Florida 33306.

ARTICLE V -- ADMISSION OF NEW MEMBERS

No additional members shall be admitted to the Company except with the unanimous written consent of all the members of the Company and on such terms and conditions as shall be determined by all the members. A member may transfer his or her interest in the Company as set forth in the regulations of the Company, but the transferee shall have no right to participate in the management of the business and affairs of the Company or become a member unless all the other members of the Company other than the member proposing to dispose of his or her interest approve of the proposed transfer by unanimous written consent.

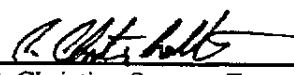
ARTICLE VI -- TERMINATION OF EXISTENCE

The Company shall be dissolved on the death, bankruptcy, or dissolution of a member or manager, or on the occurrence of any other event that terminates the continued membership of a member in the Company, unless the business of the Company is continued by the consent of all the remaining members.

ARTICLE VII -- MANAGEMENT

The Company shall be managed by a manager in accordance with regulations adopted by the members for the management of the business and affairs of the Company. These regulations may contain any provisions for the regulation and management of the affairs of the Company not inconsistent with law or these articles of organization. The name and address of the initial manager of the Company is Colin Montgomery, of 25 Braintree Hill Office Park, Braintree, Massachusetts 02110.

IN WITNESS WHEREOF, the undersigned organizer has made and subscribed these articles of organization at Fort Lauderdale, Florida, on this 30TH day of April, 2002.


C. Christian Sautter, Esq.
Seiler & Sautter
2900 East Oakland Park Boulevard
Suite 200
Fort Lauderdale, Florida 33306

FILED
02 MAY -6 AM 9:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA
COUNTY OF BROWARD

Sworn to (or affirmed) and subscribed before me this 30th day of April, 2002, by, C. Christian Sautter (name of person making statement).



M. Tamara Rimes
MY COMMISSION # DD102632 EXPIRES
March 24, 2006
BONDED THRU TROY FAIR INSURANCE, INC.

Notary Public -- State of Florida



Print, Type, or Stamp
Commissioned Name of Notary Public



Personally Known ☒ OR Produced Identification ☐

Type of Identification Produced _____



M. Tamara Rimes
MY COMMISSION # DD102632 EXPIRES
March 24, 2006
BONDED THRU TROY FAIR INSURANCE, INC.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

**PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE
UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT
IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF
FLORIDA.**


1. The name of the limited liability company is: **OMNE GROUP, LLC**
2. The name and address of the registered agent and office is:

**C. Christian Sautter, Esq.
Seiler & Sautter
2900 East Oakland Park Boulevard
Suite 200
Fort Lauderdale, Florida 33306**

**FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

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 property and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


C. Christian Sautter, Esq.


(Date)