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Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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From:

Account Name : ARSENAULT & REARDON

Account Number : 075350000225 Phone : (727)584-1199 Fax Number : (727)586-1071

DIVISION OF HORPORATION

LIMITED LIABILITY COMPANY

Structured Wiring Systems of Florida, LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

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Division of Corporations

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ARTICLES OF ORGANIZATION STRUCTURED WIRING SYSTEMS OF FLORIDA, LLC

a Florida Limited Liability Company

ARTICLE I NAME

The Name of this Limited Liability Company is Structured Wiring Systems of Florida, LLC (The "Company").

ARTICLE II **ADDRESS**

The mailing address and the street address of the principal office is 6450 126th Avenue. Largo, Florida 33773.

ARTICLE III DURATION

The Limited Liability Company shall begin existence on the day of filing and shall continue into perpetuity, or until dissolved in a manner provided by law or by the Operating Agreement adopted by the members of the Limited Liability Company.

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by its Managing Member and the name and address of such Managing Member(s) is/are:

Robert E. Lyons 6450 126th Avenue Largo, FL 33773

ARTICLE V ADMISSION OF NEW MEMBERS

Except as set forth in the Operating Agreement, 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 Operating Agreement of the Company, but the transferee shall have no right to participate in the management of the business and affairs of the

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Company or become a member unless all of the members of the Company other than the member proposing to dispose of his or her interest approve of the proposed transfer by written consent.

ARTICLE VI MEMBER'S RIGIIT TO CONTINUE BUSINESS

The Company shall be dissolved on the death, bankruptcy, or dissolution of a member or manager, or on 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 majority in interest vote of all the remaining members.

AUTHORIZED REPRESENTATIVE OF MEMBER STRUCTURED WIRING SYSTEMS OF FLORIDA, LLC

KENNETH G. ARSENAULT, JR.

STATE OF FLORIDA) COUNTY OF PINELLAS)

The foregoing instrument was acknowledged before me this // day of _______, 2002, by Kenneth G. Arschault, Jr., the Authorized Representative of Structured Wiring Systems of Florida, LLC, who is personally known to me.

WITNESS WHEREOF, I have hereunto set my hand and seal in the county and state lest aforesaid on the day and year first above written.

Notary Public

My Commission Expires:

Dorone Sciectificano MY COMMISSION # CC758903 EXPIRES JULY 18, 2004 DONDED THRU TROY FAIN INDURANCE, INC. H020001511144.

LLC

ACCEPTANCE OF REGISTERED AGENT

Pursuant to the provisions of Section 608.415 or 608.507, Florida Statues, the undersigned Limited Liability Company submits the following statement to designate a Registered Office and Registered Agent in the State of Florida:

The name of the Limited Liability Company is: Structured Wiring Systems of Florida,

The name and Florida street address of the Registered Agent is:

Kenneth G. Arsenault, Jr. 10225 Ulmerton Road, Suite 2 Largo, FL 33771

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 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.

Kenneth G. Arsenault, Jr.

STATE OF FLORIDA) COUNTY OF PINELLAS)

Notary Public

My Commission Expires:

Dotono Sckiehilano My COMMISSION # CC948903 EXPIRES July 18, 2004 Bonded thru taoy fain insuranor, inc

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