1 MMDDMASS

| | | 5 | |
|--|-------------|--|---------------------------------------|
| ACCOUNT NO. : 072100000032 | | | ,-3 - — |
| REFERENCE : 665560 7343956 | | | · |
| AUTHORIZATION: Tatricia Lyuto | | | |
| COST LIMIT : \$ 125.00 | | , | · · · · · · · · · · · · · · · · · · · |
| ORDER DATE : July 16, 2002 | | | = |
| ORDER TIME : 10:20 AM | | | |
| ORDER NO. : 665560-001 | | | |
| CUSTOMER NO: 7343956 | - | | |
| CUSTOMER: Mr. Mario B. Kosseifi Mr. Mario B. Kosseifi | | | = |
| 1752 Cherry Ridge Dr. | 80000 | 6590968- | 3 |
| Lake Mary, FL 32746 | = <u></u> 1 | | .= -=- |
| DOMESTIC FILING | | | . . |
| NAME: BIT, LLC | | | · _== |
| EFFECTIVE DATE: | | 02 JI SECO TALLI | - - - - |
| ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION | | FILE JUL 23 - CRETARY LAHASSE | |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: | s. | PH 2: | |
| CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING | | 12 RIDA | and a second |

CONTACT PERSON: Sara Lea - EXT. 1114
EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited | l Liability Company is: | | |
|--|--|--|--------|
| BIT, LLC | | | |
| ARTICLE II - Address The mailing address and | s: I street address of the principal office of the Limited Liability Con | apany is: | |
| 1752 CHERRY RIDGE I | DRIVE, HEATHROW, FLORIDA 32746 | | |
| ARTICLE III - Registe | ered Agent, Registered Office, & Registered Agent's Signature | : : | |
| The name and the Florid | a 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 | • | |
| registered agent and agr statutes relating to the pi accept the obligations of | place designated in this certificate, I hereby accept the appointment ree to act in this capacity. I further agree to comply with the provisor roper and complete performance of my duties, and I am familiar wifmy position as registered agent as provided for in Chapter 608, F. Corporation Service Company By: () () () () () () () () () (| ions of all ith and S. per | |
| ☐ The Limited Liabili | ent (Check box if applicable.) ity Company is to be managed by one manager or more managers er - managed company. | and is, | |
| | ditional article must be added if an effective date is requested) | 02 FAL | |
| | Delyonah do Skinmi | | |
| Sign | ature of a member or an authorized representative of a member. | ASA N | عر الد |
| (In of tl | accordance with section 608.408(3), Florida Statutes, the execution his document constitutes an affirmation under the penalties of perjury the facts stated herein are true.) | 3 PM 2: 12 RY OF STATE ISEE, FLORID! | ΞĒ |
| | DEBORAH D. SKIPPER | سست د د د د د | |
| | 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)

MEMBERS OF BIT, LLC

MARIO B. KOSSEIFI 1752 Cherry Ridge Drive Heathrow, Florida 32746

ANNA M. KOSSEIFI 1752 Cherry Ridge Drive Heathrow, Florida 32746

02 JUL 23 PM 2: 12
SECRETARY OF STATE
TALL AHASSEF, FLORIDA

APPRUYEL:

LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of BIT, LLC (the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

This Limited Power of Attorney is executed on this 22 day of July, 2002.

MARIO Kosseifin

Print Name of Signer

WITNESS

WITNESS:

Signatura

Signature

Print Name of Witness

D2 JUL 23 PM 2: 12
SECRETARY OF STATE.

APROVE