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BRYAN K. McLACHLAN

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September 12, 2002

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Florida Department of State
DIVISION OF CORPORATIONS
Post Office Box 6327
Tallahassee, Florida 32314

RE: Consoletec Computer Systems, L.L.C.

Dear Division of Corporations:

Enclosed is an original plus one copy of the Articles and Designation of Registered Agent for filing regarding the above-referenced limited liability company. I have enclosed the \$100 fee for the Articles and the \$25 fee for the Designation of Registered Agent.

If you have any questions or comments, please do not hesitate to contact me.

Sincerely,

Bryan K. McLachlan

BKM/ams
Enc.

FILED
02 SEP 24 AM 9:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION
Consolotec Computer Systems, L.L.C.

ARTICLE I

Name: Consolotec Computer Systems, L.L.C.

ARTICLE II

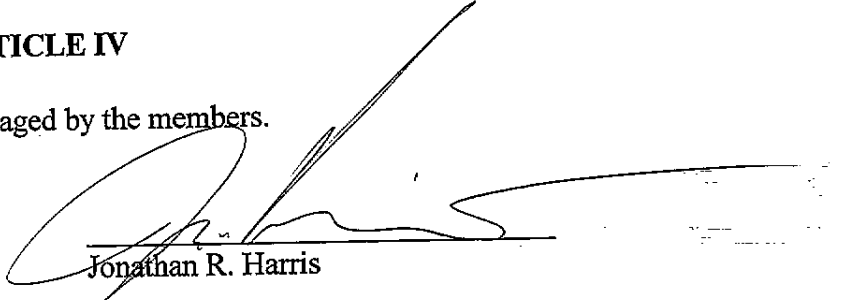
Address: The mailing address and street address of the principal office of the L.L.C. is 2315 Pembroke Drive, Clearwater, Florida 33764.

ARTICLE III

Registered Agent: The name and address of the initial registered agent is Bryan K. McLachlan, 7985 113th Street North, Suite 340, P.O. Box 7427, Seminole, Florida 33775.

ARTICLE IV

Management: The L.L.C. is to be managed by the members.



Jonathan R. Harris

In accordance with Section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under penalties of perjury that the facts stated herein are true.

FILED
20 SEP 24 AM 9:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LLC SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the LLC is Consoletec Computer Systems, LLC.
2. The name and the Florida street address of the registered agent is Bryan K. McLachlan, 7985 113th Street North, Suite 340, P.O. Box 7427, Seminole, Florida 33775.

Having been named as Registered Agent and to accept service of process for the above-stated LLC at the place designated in the Certificate, I hereby accept the appointment as Registered Agent and agree to act in the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Bryan K. McLachlan
7985 113th Street North, Suite 340
P.O. Box 7427
Seminole, Florida 33775
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SEP 21 AM 9:01
STATE OF FLORIDA
TALLAHASSEE, FLORIDA