# L02000028444

(Requestor's Name)
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2002 OCT 25 PM 2: 45
2002 OCT 25 PM 2: 45
DIYLON OF CORPORATIONS
DIYLON OF CORPORATIONS



ACCOUNT NO. : 072100000032

REFERENCE: 789697 7354449

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE: October 21, 2002

ORDER TIME: 8:59 AM

ORDER NO. : 789697-001

CUSTOMER NO: 7354449

CUSTOMER: Ms. Monica Eaton

Ms. Monica Eaton

13499 Biscayne Blvd.

Suite M1

North Miami, FL 33181

# DOMESTIC FILING

NAME:

SQUARE ONE COMMUNICATIONS LLC

### EFFECTIVE DATE:

	ARTICLES OF	INCORPORATI	ION
	CERTIFICATE	OF LIMITED	PARTNERSHIE
XX	ARTICLES OF	ORGANIZATIO	ON

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

	CERTIFIED CO	YYC	
XX	PLAIN STAMP	ED COPY	
	CERTIFICATE	OF GOOD	STANDING

CONTACT PERSON: Darlene Ward - EXT. 1135

EXAMINER'S INITIALS:

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICL	EI	- N	ame:
The name	of	the	Limit

ted Liability Company is:

SQUARE ONE COMMUNICATIONS LLC

## ARTICLE II - Address:

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

The maning address and street address of the principal office of the Limited Liability Company is:
13499 Biscayne Boulevard, Suite M1, North Miami, Florida 33181
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature
13499 Biscayne Boulevard, Suite M1, North Miami, Florida 33181  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
Corporation Service Company
Name Of S
NO W
Florida street address (P.O. Box NOT acceptable)
m. 17.22
Tallahassee FL 32301  City, State, and Zip
Crift Daily all Lip
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: We have a Company.  By: We
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)
Deborah N Skipper
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.)
Deborah D. Skipper
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)

MANAGING MEMBER OF: SQUARE ONE COMMUNICATIONS LLC

Monica Eaton Managing Member 13499 Biscayne Boulevard

Suite M1

North Miami, Florida 33181

ON THE SEE TO BE THE SEE TO BE TO BE

LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Company ("CSC"), a Delawate for the undersigned to do business in the State of Florida, as its attorney-in-fact for the label of the undersigned the original Articles or the undersigned the original Articles or the undersigned the original Art 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 Amorney 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 A ally of October 2002

Print Name of Signer

Signature

Print Name of Witness

FL LLC D-LIMITED POWER OF ATTORNEY 64/00 (FLLLCA'YI)