Division of Corporations
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Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : BUSINESS FILINGS
Account Number : 105256001620
Phone : (608)827-5300
Fax Number : (608)827-5501

DIVISION OF CORPORATIONS

LIMITED LIABILITY COMPANY

Netsytix, LLC

 Certificate of Status
 0

 Certified Copy
 1

 Page Count
 03

 Estimated Charge
 \$155.00

To:

ARTICLES OF ORGANIZATION OF Netaytix, LLC

ARTICLE I

NAME

The name of the limited liability company shall be: Netsytlx, LLC

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 2967 Sans Pareil Street, Jacksonville, Florida 32246.

ARTICLE III

INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Michael Dunn, 2967 Sans Pareil Street, Jacksonville, Florida 32246. Located in the County of Duval.

ARTICLE IV

DURATION

The duration for the limited liability company shall be: 12/31/2042.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the names and addresses of the members of the Limited Liability Company are:

Michael Dunn, 2967 Sans Pareil Street, Jacksonville, Florida 32246 Travis Johnson, 9480 Princeton Square Blvd. #403, Jacksonville, Florida 32256

Business Filings Incorporated

Authorized Representative

Prepared by Mark Schiff, Husiness Filings Incorporated, 8025 Excelsior Dr., Suite 200,

Madison, WI 53717

(608) 827-5300

FAX AUDIT # 40200 226 818 /

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: Netrytix, LLC

The name and address of the registered agent and office is Michael Dunn, 2967 Sans Parcil Street, Jacksonville, Florida 32246. Located in the County of Duval.

Having been named as registered agent and to accept service of process for the above stated corporation 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.

Signature

Michael Phint

Date: November 14, 2002

SECRETARY OF STATE DIVISION OF CORPORATION OF CORPORATION OF STATE OF CORPORATION OF STATE OF CORPORATION OF CO