

L04000014063

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850) 205-0383

From:
Account Name : HUBCO
Account Number : 104662003400
Phone : (516) 935-3940
Fax Number : (516) 935-3088

LIMITED LIABILITY COMPANY

United Telephone Services L.L.C.

Certificate of Status	1
Certified Copy	0
Page Count	02
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204-14063
OR

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

H04000037798

ARTICLE I - Name

The name of the Limited Liability Company is: **United Telephone Services L.L.C.**

ARTICLE II - Address

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

Principal Office Address:

2751 N. Hiawassee Road

Orlando, FL 32818

Mailing Address:

2751 N. Hiawassee Road

Orlando, FL 32818

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature

The name and Florida street address of the registered agent are:

John A. Brathwaite

Name

2751 N. Hiawassee Road

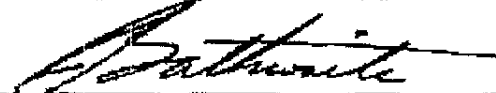
(P.O. Box or Mail Drop Box **NOT** Acceptable)

Orlando, FL 32818

(City / State / Zip)

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.

X



Registered Agent's Signature - John A. Brathwaite

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 FEB 20 AM 9:25

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ARTICLE IV - Manager(s) or Managing Member(s):

H04000037798

The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGRM

John A. Brathwaite - 2751 N. Hiawasse Road, Orlando, FL 32818

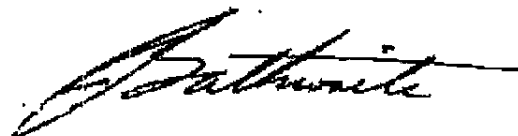
MGRM

Royle G. De-Jong - 2751 N. Hiawasse Road, Orlando, FL 32818

(Use attachment if necessary)

REQUIRED SIGNATURE:

X



Signature of a member or 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.)

John A. Brathwaite

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

24 FEB 20 AM 9:29

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