MAR-30-04 12 10PM FROLAKELM SENTENTITUE USON 1305324095 T-83 CA103  TO: Tre- Harris March 24, 200 C, fogether direct  Plent to spen March 24, 200 C, fogether direct  Visita Facilities Florida Department of State  Develop Cas (LB + Division of Corporations	F-764 200 Z f,	smil
of Cuella Cag, LCC + Division of Corporations  France Vision Franca Smooth Public Access System  of Cuella Cag, LCC - Electronic Filing Cover Sheet		
On se helt if and good of Morek so so the	ilie	ig
Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.	HOLL Benen	<u>e</u>
		ريد.
(((H04000060052 3)))		
Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.		
Division of Corporations  Fax Number /: (850)205-0383  From: Account Name : AKERMAN, SENTERFITT & EIDSON, P.A.  Account Number : 075471001363  Phone : (305)374-5600  Fax Number : (305)374-5095	04 MAR 26 PH	AND FILE
LIMITED LIABILITY COMPANY	11-11-11-11 11-11-11-11 11-11-11-11	
PrimeVision Communications of Cutler Cay LLC	<u></u>	
Certificate of Status 0		
Certified Copy 1 Page Count 01		
Estimated Charge \$155.00		
Flacticule Filing Medu. Composite Filing: Bublic Access Heli	•	

## FAX AUDIT No. H04000060052

## ARTICLES OF ORGANIZATION FOR PRIMEVISION COMMUNICATIONS OF CUTLER CAY LLC

## ARTICLE I - Name:

The name of the Limited Liability Company is: PrimeVision Communications of Cutler Cay LLC.

## ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 2685 Executive Fark Drive, Suite 5, Weston, FL 33331.

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

Tod Workman

2685 Executive Park Drive, Suite 5

Weston, FL 33331

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.

Tool Workman

Signed and dated this 22<sup>nd</sup> of March, 2004.

Tod Workman

Authorized representative of a member

FAX AUDIT No. H04000060052