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To:

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Fax Number : (850)205-0383.

From:

Account Name

: JOSEPH L. DIAZ, ESQUIRE

Account Number : 073367003503 Phone

: (813)879-6164

Fax Number

: (813)875-2618

# LIMITED LIABILITY COMP

# DATA HOSTING SOLUTIONS, LLC

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#### ARTICLES OF ORGANIZATION

OF

# DATA HOSTING SOLUTIONS, LLC

# a Florida Limited Liability Company

#### ARTICLE I - Name:

The name of this Limited Liability Company is DATA HOSTING SOLUTIONS, LLC.

#### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is 100 Ashley Drive, Suite 1230, Tampa, FL 33602.

## ARTICLE III - Registered Agent:

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

Joseph L. Diaz, Esq, 2522 W. Kennedy Blvd. Tampa, FL 33609-3391

## ARTICLE IV - Members Right To Continue Business

The right of the remaining members of the Limited Liability Company to continue the business on the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member iff the Limited Liability Company shall be:

The death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of

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Joseph L. Diaz, Esquire 2522 West Kennedy Boulevard Tampa, FL 33609 813/879-6164 Florida Bar No. 179925

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a member in the Limited Liability Company shall not terminate the Limited Liability Company, and the business of the Limited Liability Company shall be automatically continued, so long as there is at least one remaining member.

AUTHORIZED REPRESENTATIVE OF A MEMBER DATA HOSTING SOLUTIONS, LLC.

ØSEPH L. IDLAZ

Having been named as resident 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.

Resident Agent's Signature

(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 arc true.)