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TRANSMITTAL LETTER

TO:		ation Sec n of Corp									
SUBJ	ECT:	R	HINO	W/RE Name of Limite	CC55 d Liability C	CC (ompany)					
			_	and fee(s) are s		_					
Please	e return all	согтеѕро	ndence conc	erning this matte	er to the folio	owing:					
	_		BONN	OLING <mark>I</mark>	X Name of Perso	on)					
<u></u>		(OLINGO	n Com	PANY Firm/Compan	у)			_		
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					•	7 3 4/ Code)			SECRETARY OF SIAIDA	2004 DEC 20 PH 3: 01	LED
For fi	urther info	rmation c	oncerning th	is matter, please	call:				Ä		
	CAN	Ol (Name)	ING E	٧	at (<u>248</u>	3 705- a Code & Daytime	-510)	/ umber)			
		(Mante (or reason)		(Alc	a Cook & Daymine	стерионе г	unieci j			
Encl	osed is a c	check for	the follow	ing amount:							
xl s 12	25.00 Fili	ng Fee	S130.06 Certificate	Filing Fee & of Status	Certified	00 Filing Fee & Copy copy is enclosed)	Certific Certifi	0.00 Filing cate of Stat ied Copy nal copy is en	us &		
		etde:	ET ANNDE	ee.	•	MATLING	ANNRESS	-			

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	ARTICLE I - Name: The name of the Limited Liability Company is:	
	RHINO CONTROLOGICA WIRELESS	LLC
	ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Lia	bility Company is
FRANKINIT	Principal Office Address: Mailing Address:	
. ,	8 BRUSH SMEET SAME RONTIAC, MI 48341	
	PONTIAC, MI 48341	
	ARTICLE III - Registered Agent, Registered Office, & Registered Agent's	Signature:
	The name and the Florida street address of the registered agent are:	
	Steven C. Halliday	
	23334 CHEARISTON Place	
	Florida street address (P.O Box <u>NOT</u> acceptable) LAND O'LAKED FL 34639	
	City, State, and Zip	1

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.

Registered Agent's Signature

(CONTINUED)

Page 1 of 2

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SECRETARY OF STATE

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

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

Title: "MGR" = Manag "MGRM" = Mar		Name and Address: Stan Market OLINGER 8 BRUSH STREET PONTIAC H 4834			
	itional article must be	added if an effective date is requested.			
REQUIRED SIG	GNATURE:				
	(In accordance with section of this document constitute that the facts stated herein	an authorized representative of a member. 608.408(3), Florida Statutes, the execution is an affirmation under the penalties of perjury in are true.) OLINGTIC or printed name of signee	SECRE FART OF STATE	2004 DEC 20 PM 3: C	77

Filing Fees:

\$125.00 Eiling Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)