# L05000013421

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# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Central Florida Conmunications, SSC	FEB-4 PH 2: 11
	Art of Inc. File  LTD Partnership File  Foreign Corp. File
	L.C. FileFictitious Name FileTrade/Service Mark
	Merger File Art. of Amend. File RA Resignation Dissolution / Withdrawal
	Annual Report / Reinstatement  Cert. Copy  Photo Copy
	Certificate of Good Standing  Certificate of Status  Certificate of Fictitious Name  Corp Record Search
	Officer Search  Fictitious Search  Fictitious Owner Search
Requested by:  Name  Date  Signature  2405 3:00  Time	Vehicle Search  Driving Record  UCC 1 or 3 File  UCC 11 Search
Walk-In Will Pick Un	UCC 11 Retrieval



# FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 7, 2005

CAPITAL CONNECTION

TALLAHASSEE, FL

SUBJECT: CENTRAL FLORIDA COMMUNICATIONS LLC

Ref. Number: W05000006059



We have received your document for CENTRAL FLORIDA COMMUNICATIONS LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$125.00 payment.

Please list the R.A. address in Item 4.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Document Specialist

Letter Number: 505A00008297





The undersigned, being authorized to execute and file these articles, hereby certifies that:

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

#### Article 1 - Name

The name of this limited liability company is CENTRAL FLORIDA COMMUNICATIONS LIMITED LIABILITY COMPANY.

Article 2 - Address

The mailing address and street address of the principal office of this limited liability company is 2790 Lake Hulen Osteen Road, Deltona, FL 32738.

#### Article 3 -Duration

The company shall commence its existence on the date these Articles of Organization are filed by the Florida Department of State. The company's existence shall be perpetual unless the company is dissolved earlier as provided in these Articles of Organization or in the regulations.

Article 4 - Initial Registered Office and Agent

The name and street address of the initial registered agent are:
 Michael J. Peters, 2790 Lake Helen Osteen Road, Deltona, FL 32738.

## Article 5 - Management

The company shall be managed by the members in accordance with regulations adopted by the members for the management of the business and affairs of the company. These regulations may contain any provisions for the regulation and management of the affairs of the company not inconsistent with law or these Articles of Organization. The names and addresses of the members of the company are:

MICHAEL J. PETERS, Co-Trustee Peters Family Revocable Living Trust 2790 Lake Helen Osteen Road Deltona, FL 32738

KAREN PETERS, Co-Trustee Peters Family R evocable Living Trust 2790 Lake Helen Osteen Road Deltona, FL 32738 IN WITNESS WHEREOF I have signed these Articles of Organization as a member and acknowledge them to be my act this 4 to day of to be any act this 4 to be acknowledge.

MICHAEL J. RETERS

Member

STATE OF FLORIDA COUNTY OF SEMINOLE

BEFORE ME, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared MICHAEL J. PETERS, known personally by me to be the person who executed the foregoing Articles of Organization and he acknowledged under oath before me that he executed these Articles of Organization and produced FL DR. LIC. # P362-5507aB identification.

WITNESS my hand and official seal in the County and State named above this

Notary Public

My Commission expires:

Richard W Copelend
My Commission DD108578
Expires May 19, 2006

### ACKNOWLEDGMENT OF REGISTERED AGENT

I HEREBY accept the designation as Registered Agent to accept service of process for the above stated limited liability company at the place designated in this statement. I further agree to comply with the provisions of all statutes related to the profer and complete performance of my duties and I am familiar with and accept the obligation of my position as Registered Agent under Chapter 608, Florida Statutes.

MICHAEL J. PETERS
Registered Agent