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To:

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Fax Number : (850) 205-0383

From:

Denzel A. Dwyer, Esq. C.A.D.
Account Name : AKERMAN, SENTERFITT & EIDSON, P.A.
Account Number : 075471001363
Phone : (305) 374-5600
Fax Number : (305) 374-5095

LIMITED LIABILITY COMPANY

SBA TOWER DEVELOPMENT, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
FOR
SBA TOWER DEVELOPMENT, LLC**

ARTICLE I - Name:

The name of the Limited Liability Company is: SBA Tower Development, LLC.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 5900 Broken Sound Parkway NW, Boca Raton, Florida 33487.

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

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

CT Corporation System
1200 South Pine Island Road
Suite 250
Plantation, FL 33324

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:

CT Corporation System

By: Barbara Burke

Name: _____

Title: BARBARA A. BURKE
SPECIAL ASSISTANT SECRETARY

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ARTICLE IV - Management:

The Limited Liability Company is a member-managed company.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Thomas P. Hunt
Authorized representative of a member

Signed and dated this 21st day of June, 2005.

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