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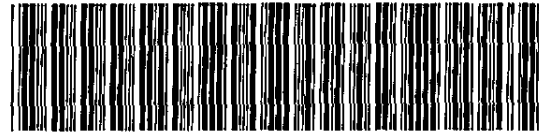
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EFFECTIVE DATE

8/1/05

07/18/05--01051--022 **160.00

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SECURITY TESTING
TELEPHONE ROOM

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

TELCOM NETWORK, LLC

SUBJECT: _____
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

TERRY KELCHNER

(Name of Person)

TELCOM NETWORK, LLC

(Firm/Company)

1062 HENLEY DOWNS PLACE

(Address)

HEATHROW, FL - 32746

(City/State and Zip Code)

For further information concerning this matter, please call:

TERRY OR JUDY KELCHNER

(Name of Person)

at (**407**) **804-1556 or 804-1515**
(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

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

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TELCOM NETWORK, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

1062 HENLEY DOWNS PLACE
HEATHROW, FL - 32746

1062 HENLEY DOWNS PLACE
HEATHROW, FL - 32746

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

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

TERRY KELCHNER

Name

1062 HENLEY DOWNS PLACE

HEATHROW, FL - 32746
Florida street address (P.O. Box **NOT** acceptable)

FL

City, State, and Zip

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.

Terry Kelchner
Registered Agent's Signature

(CONTINUED)

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

TERRY KELCHNER

1062 HENLEY DOWNS PLACE

HEATHROW, FL - 32746

MGRM

JUDY KELCHNER

1062 HENLEY DOWNS PLACE

HEATHROW, FL - 32746

(Use attachment if necessary) **ARTICLE V - EFFECTIVE DATE: AUGUST 1, 2005**

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(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 are true.)

TERRY KELCHNER, MGR

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

FILED
2005 JUL 18 P 1:11
TALLAHASSEE, FLORIDA
SECRETARY OF STATE