

L06000027447

(Requestor's Name)

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(City/State/Zip/Phone #)

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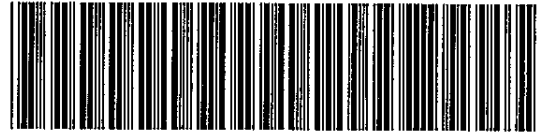
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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 920693 7116497

AUTHORIZATION :

COST LIMIT \$ 125.00

FILED  
2006 MAR 15 PM 1:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ORDER DATE : March 15, 2006

ORDER TIME : 9:54 AM

ORDER NO. : 920693-005

CUSTOMER NO: 7116497

DOMESTIC FILING

NAME: COMPLETE COMMUNICATIONS, LLC

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Jamela Fordyce - EXT. 2936

EXAMINER'S INITIALS: \_\_\_\_\_

**ARTICLES OF ORGANIZATION  
OF  
COMPLETE COMMUNICATIONS, LLC**

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

**ARTICLE I - NAME**

The name of the limited liability company shall be: COMPLETE COMMUNICATIONS, LLC, ("company").

**ARTICLE II - ADDRESS**

The mailing address and street address of the principal office of the company is:

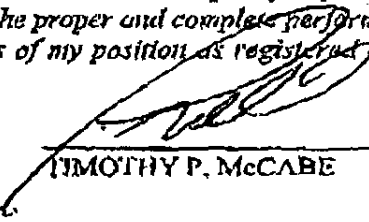
840 U.S. Highway One  
Suite 435  
North Palm Beach, Florida 33408

**ARTICLE III - REGISTERED AGENT, OFFICE AND AGENT'S SIGNATURE**

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

Timothy P. McCabe  
2135 S. Congress Avenue, Ste. 3C  
West Palm Beach, FL 33406

*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 obligations of my position as registered agent as provided for in Chapter 608, F.S.*

  
TIMOTHY P. McCABE

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TALLAHASSEE, FLORIDA

#### ARTICLE IV - MANAGEMENT

The company is to be managed by one manager or more managers and is, therefore, a manager - managed company as follows:

TITLE:

Manager

NAME and ADDRESS:

Paul S. Cowan  
840 U.S. Highway One, Ste. 435  
North Palm Beach, Florida 33408

#### ARTICLE V - EFFECTIVE DATE

The effective date of the company shall be immediately upon filing of these articles.

IN WITNESS WHEREOF, the undersigned member or authorized representative has made and subscribed these articles of organization at Palm Beach County, Florida, on March  
15, 2006.



PAUL S. COWAN, MANAGER

(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.)

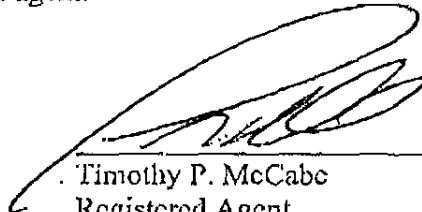
**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

Under the provisions of F.S. 608.415 or 608.507, **COMPLETE COMMUNICATIONS, LLC**, submits the following statement to designate a registered office and registered agent in the state of Florida:

1. The name of the limited liability company is **COMPLETE COMMUNICATIONS, LLC**.
2. The name and address of the registered agent in Florida are:

Timothy P. McCabe  
2135 S. Congress Avenue, Ste. 3C  
West Palm Beach, FL 33406

The undersigned, being the person named in the articles of organization of **COMPLETE COMMUNICATIONS, LLC**, as the registered agent of this limited liability company, hereby consents to accept service of process for the above-stated company at the place designated in the articles of organization, and accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his or her duties, and is familiar with and accepts the obligations of the position of registered agent.

  
\_\_\_\_\_  
Timothy P. McCabe  
Registered Agent