Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850)205-0383

Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number : 120010000247 : (800)494-3124 Phone

Fax Number : (305) 675-2811

≅ F≰ORIDA/FOREIGN LIMITED LIABILIT

WIRE WIZARDS LLC

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608,F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

WIRE WIZARDS LLC

ARTICLE II ADDRESS

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

4274 KIPLING DR

.COCOA, FL 32926-6812

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED

SIGNATURE

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

LINDA SAADOUN 4274 KIPLING DR

COCOA, FL 32926-6812

Having been named as registered agent 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.

TINDA SAADOUN / Registered Agent's Signature

The Limited Liability Company is to be managed by one or more members and is, therefore, a member-managed company.

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PAGE 2 WIRE WIZARDS LLC

ARTICLE V MEMBERS (optional)

MANAGING MEMBER: LINDA SAADOUN 4274 KIPLING DR COCOA, FL 32926-6812

MANAGING MEMBER: ROBERT HOPPER 4274 KIPLING DR COCOA, FL 32926-6812

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.

LINDA SAADOUN
Typed or printed name of signee

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SECRETARY UF STATE