Florida Department of State

Division of Corporations -Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : A.B.S. OF JACKSONVILLE, INC.

Account Number: 120010000215

; (904)777-1533

Phone Fax Number

: (904)777-1717

ELORIDA/FOREIGN LIMITED LIABILITY CO.

Wired Communications, LLC

Certificate of Status	l l
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I. NAME:

The name of the Limited Liability Company is: Wired Communications, LLC

ARTICLE II. ADDRESS:

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

5291 Collins Road Jacksonville, FL 32244

ARTICLE III. REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

The name and Florida street address of the registered agent are: David Maleckar 5291 Collins Road Jacksonville, FL 32244

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place of 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, Florida Statutes.

David Maleckart Registered Agent

9/7/06 Date

ARTICLE IV. MANAGER(S) OR MANAGING MEMBER(S):

The name(s) and address(es) of each Manager or Managing Member is as follows:

Title. MGR.

Name and Address. David Maleckar 5291 Collins Road Jacksonville, FL 32244

IN WITNESS WIIEREOF, the undersigned member(s) has executed these Articles Organization, this _______, 2006.

(in accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.)

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