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(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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PREPARTHENT OF STATE

PREPART OF THE OR ATTOM



ACCOUNT NO.: 072100000032	124
REFERENCE: 464906 7527475	•
AUTHORIZATION :	2
COST LIMIT: \$120.00	بر
ORDER DATE : September 19, 2006	- F
ORDER TIME : 5:52 PM	
ORDER NO.: 464906-005	
CUSTOMER NO: 7527475	
	<u>-</u> -
DOMESTIC FILING	
NAME: CARTER 678, LLC	
EFFECTIVE DATE:	
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
XX CERTIFIED COPY **QUANITY OF 2** PLAIN STAMPED COPY XX CERTIFICATE OF GOOD STANDING	
CONTACT PERSON: Susie Knight - EXT. 2956	
EXAMINER'S INTTIALS.	

OF SEP 20 PAINS

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY CON

ARTICLE I - Name:	RECE
The name of the Limited Liability Company is:	7
Carter 678, LLC	
(Must end with the words "Limited Liability Company, "Limited Cor	mpany" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	
The mailing address and street address of the princip	pal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:	
1001 East Telecom Drive	1001 East Telecom Drive	
Boca Raton, Florida 33431	Boca Raton, Florida 33431	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Corporation S	Service Company				
Name					
1201 Hays St	reet				
	Florida street address (P.O. Box NOT acceptable)				
Tallahassee	FL 32301				
	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..

By Sue G. Knight
Registered Agent's Signature (MEOUIRED) as its agent

(CONTINUED) Page 1 of 2

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR/CEO	Larry D. Silver
	1001 East Telecom Drive
	Boca Raton, Florida 33431
MGR/P	B. Judson Honaker, Jr.
	1201 Central Park Blvd.
	Fredericksburg, Virginia 22401
effective date is listed, the date mus	the date of filing: (OPTIONAL) st be specific and cannot be more than five business days p
0 days after the date of filing.)	
REQUIRED SIGNATURE:	
	mber or an authorized representative of a member.

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)

Typed or printed name of signee