# L07000115708

(Re	questor's Name)	
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(Cit	:y/State/Zip/Phone #)	1
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# COVER LETTER

-	of Corporations	74	·
<sub>subject:</sub> Bro	oadband Wireless,	LLC	
SUBJECT:		ted Liability Company)	
The enclosed Artic	cles of Organization and fee(s) are	submitted for filing.	
Please return all co	orrespondence concerning this mat	tter to the following:	
Navin	dra Narine		
		(Name of Person)	_
Broad	lband Wireless, LL	С	
		(Firm/Company)	
8015	Terrace Ridge Driv	e	
<del>-</del>		(Address)	
Tamp	a, FL 33637		
	(Ci	ty/State and Zip Code)	
For further inform	ation concerning this matter, pleas	e call;	
Navindra	Narine	at (813) 767-608 (Area Code & Daytime Tele	36
	(Name of Person)	(Area Code & Daytime Tele	phone Number)
Enclosed is a che	eck for the following amount:		
\$125.00 Filing	Fee \$\int_\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Broadband Wireless, LLC  (Must end with the words "Limited Liability)	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
8015 Terrace Ridge Drive Tampa, FL 33637	8015 Terrace Ridge Drive Tampa, FL 33637
74	
(The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)  The name and the Florida street address of the reaction Name  Name	
8015 Terrace Ridg	ie Drive
Florida street add	ress (P.O. Box <u>NOT</u> acceptable)
Tampa, FL 33637 City, State, a	FL und Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete pe	accept service of process for the above stated limited his certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of all of the provisions of all strengths and I am familiar with and stered agent as provided for in Chapter 608, F.S
Vl-26	Peire

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

SECRETARY OF STATE
DIVISION OF CORPORATION:

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

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

1GR	Navindra Narine	
	8015 Terrace Ridge Drive	
	Tampa, FL 33637	
MGRM	Murley Narine	
	8015 Terrace Ridge Drive	
	Tampa, FL 33637	
Use attachment if necessary)		
.E.V. Effective date if other than the	ne date of filing: (OP)	ΓΙΟΝ

### **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.)

## Navindra Narine

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)