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EXAMINER

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SECRETARY OF STATE
ALLAHASSEE OF STATE



ACCOUNT NO. : 072100000032 REFERENCE: 418199 7540304 AUTHORIZATION --COST LIMIT : ORDER DATE: January 25, 2008 ORDER TIME : 4:28 PM ORDER NO. : 418199-050 CUSTOMER NO: 7540304 DOMESTIC FILING NAME: EQ FLORIDA EQUIPMENT LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: \_ CERTIFIED COPY XX PLAIN STAMPED COPY \_\_\_ CERTIFICATE OF GOOD STANDING CONTACT PERSON: Troy Todd - EXT. 2940

EXAMINER'S INITIALS:

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY **ARTICLE I - Name:** The name of the Limited Liability Company is: EQ Florida Equipment LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.") **ARTICLE II - Address:** The mailing address and street address of the principal office of the Limited Liability Company is: Mailing Address: **Principal Office Address:** 5454 West 110th Street 5454 West 110th Street Mailstop KSOPK 10702 Mailstop KSOPKJ0702 Overland Park, KS 66211 Overland Park, KS 66211 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 Service Company Name

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..

Florida street address (P.O. Box NOT acceptable)

FL 32301

Corporation Service Company
BY: A MARCO OF MONO

1201 Hays Street

Tallahassee

Pagistated Apent's Signature (REOLURE)

City, State, and Zip

(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:

MGR	Claudia S. Toussaint
	5454 West 110th Street
•	Overland Park, KS 66211
MGR	Leslie H. Meredith
	5454 West 110th Street
	Overland Park, KS 66211
MGR	William E. Cheek
<del></del>	5454 West 110th Street
	Overland Park, KS 66211
MGR	Michael J. Eason
	5454 West 110th Street
	Overland Park, KS 66211
(Use attachment if necessary)	
• •	
LE V: Effective date, if other than	the date of filing: (OPTIONA

## **REQUIRED SIGNATURE:**

EMBARD FLORIDA, INC.

3. Muhail Cagn Assistat Capital Sunfry, 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.)

Michael J. Eason, Asst. Sec., Embarq Florida, Inc.

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)