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## COVER LETTER

`	TO: Registration Section Division of Corporations			
SUBJECT: DF Security & Networking, L.L.C.				
	(Name of Limited Liability Company)			
	The enclosed Articles of Organization and fee(s) are submitted for filing.			
	Please return all correspondence concerning this matter to the following:			
	Paul Downey			
	(Name of Person)			
	Execu-tech Business Systems, Inc.			
	(Firm/Company)			
	1829 Silver Star Road			
	(Address)			
	Orlando, FL 32804			
	(City/State and Zip Code)			
	For further information concerning this matter, please call:			
	Paul Downey <u>at (407</u> ) 447-6800			
	(Name of Person) (Area Code & Daytime Telephone Number)			
	Enclosed is a check for the following amount:			
[	\$125.00 Filing Fee \$\sum \text{Status} \text{Status} \text{Status} \text{Certified Copy} \text{Certified Copy} \text{Certified Copy} \text{Certified Copy} \text{(additional copy is enclosed)} \text{Certified Copy} \text{(additional copy is enclosed)}			
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301			

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

•	
ARTICLE I - Name:	
The name of the Limited Liability Company	/ 1S:
ICN	
DE Security & Networking,	L.L.C.
(Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	a principal office of the Limited Liebility Company is
The maining address and street address of th	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
	•
1829 Silver Star Road	1829 Silver Star Road
Orlando, FL 32804	Orlando, FL 32804
	tred Office, & Registered Agent's Signature; tegistered Agent. You must designate an individual or another the registered agent are:
Paul Downey	Ecc 88
	ime Pri
102 Essex Cou	ARY ASS
Florida street	rt t address (P.O. Box NOT acceptable) 32779
Longwood, FL 3	32770 EST 5
	ate, and Zip
City, Sta	ne, and zip
liability company at the place designated registered agent and agree to act in this capa statutes relating to the proper and complete	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all e performance of my duties, and I am familiar with and registered agent as provided for in Chapter 608, F.S.
$O \circ O$	

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

### 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	Paul Downey	
The state of the s	1829 Silver Star Road	_
	Orlando, FL 32804	_
	-	_
		_
		_
<u></u>		_
		_
		_
		_

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: March 15, 2008. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

#### **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.)

Paul Downey, Mgr.

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certifled Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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