

Jan. 19. 2010 11:28AM

MICHAEL J. FREEMAN, P.A.

FAX AUDIT NO.: H10000011938 3

L100000006397

Florida Department of State
Division of Corporations
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Email Address: mfreeman@freemanmiami.com

**FLORIDA/FOREIGN LIMITED LIABILITY CO.
HUNTER TECHNICAL SERVICES, LLC**

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I – Name:**

The name of the Limited Liability Company is:

HUNTER TECHNICAL SERVICES, LLC**ARTICLE II – Address:**

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

Principal Office Address:	153 Sevilla Avenue Coral Gables, FL 33134	Mailing Address:	P.O. Box 140668 Coral Gables, FL 33114
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ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:

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

M.J. F. Registered Agent Corp.
Name153 Sevilla Avenue
Florida Street Address (No P.O. Box)Coral Gables, FL 33134
City, State, and Zip code2010 JAN 19 AM 9:00
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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.



Registered Agent's Signature
(Michael J. Freeman, President)**ARTICLE IV – Manager(s) or Managing Member(s):**

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

Title:'MGR' = Manager
'MGRM' = Managing Member**Name and Address:**

MGRM

Gregory Tresness
2030 Erie Blvd. East
Syracuse, NY 13224

MGRM

Arnold J. Hodas, Trustee
PO Box 140668
Coral Gables, FL 33114-0668

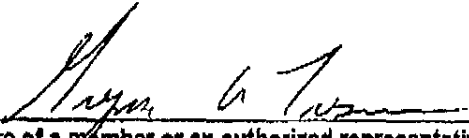
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MICHAEL J.FREEMAN.P.A

No.4512 P. 3

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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.)



Type or print name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization & Designation of Registered Agent
\$30.00 Certified Copy (Optional)
\$5.00 Certificate of Status (Optional)

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