

Division of Corporations

L11000004734

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
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From:

Account Name : MOMBACH, BOYLE & HARDIN, P.A.  
Account Number : 074143000064  
Phone : (954) 467-2200  
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Email Address: josephb@keiseruniversity.edu

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FLORIDA LIMITED LIABILITY CO.  
TELESTO, LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

T. CLINE

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EXAMINER

H11000009004 3

**ARTICLES OF ORGANIZATION**  
**OF**  
**TELESTO, LLC**

The undersigned, as the authorized representative of the initial member of TELESTO, LLC, a Florida limited liability company formed hereunder (the "Company"), on behalf of the members of the Company, hereby forms a limited liability company under the laws of the State of Florida.

**ARTICLE I**  
**COMPANY NAME**

The name of the company is TELESTO, LLC.

**ARTICLE II**  
**COMMENCEMENT AND TERM OF EXISTENCE**

In accordance with Section 608.409(1) of the Florida Limited Liability Company Act (the "Act"), the term of existence of the Company shall commence upon the filing of these executed Articles of Organization with the Florida Department of State, and shall continue perpetually, unless otherwise dissolved.

**ARTICLE III**  
**MAILING ADDRESS AND STREET ADDRESS OF COMPANY**

The mailing address, the street address and e-mail address of the principal office of the Company is:

1900 W. Commercial Boulevard  
Suite 180  
Fort Lauderdale, Florida 33309  
[josephb@keiseruniversity.edu](mailto:josephb@keiseruniversity.edu)

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ARTICLE IV  
REGISTERED AGENT AND REGISTERED AGENT ADDRESS

The registered agent and the street address of the registered agent of this Company in the State of Florida shall be:

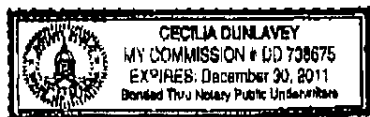
Conrad J. Boyle  
Mombach, Boyle & Hardin, P.A.  
500 East Broward Boulevard  
Suite 1950  
Fort Lauderdale, Florida 33394

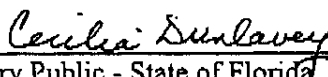
IN WITNESS WHEREOF, the undersigned being the authorized representative of the initial members of the limited liability company hereby executes these Articles of Organization, this 11 day of January, 2011.

  
\_\_\_\_\_  
CONRAD J. BOYLE

STATE OF FLORIDA  
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this 11 day of January, 2011, by CONRAD J. BOYLE, who ☒ is personally known to me or who ☐ has produced a Florida driver's license as identification.



  
\_\_\_\_\_  
Notary Public - State of Florida  
My Commission Expires:  
Commission Number:

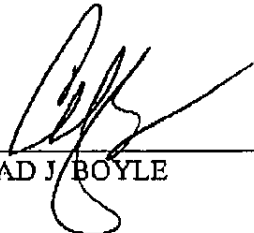
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Having been named as registered agent and to accept service of process for the above Limited Liability Company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further 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.

DATED this 11 day of January, 2011.

  
\_\_\_\_\_  
CONRAD J. BOYLE

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