

L12000052183**Florida Department of State****Division of Corporations****Electronic Filing Cover Sheet**

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : STEVEN L. HAYES, PA
Account Number : I20110000084
Phone : (727)238-5754
Fax Number : (727)478-3143

A. LUNT

APR 18 2011

EXAMINER

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address

Steve@hayesadvisoryservices.com**FLORIDA LIMITED LIABILITY CO.****Blue Sphere Communications, LLC**

0

Certificate of Status Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

**Electronic
Filing Menu**

**Corporate Filing
Menu**

2012 APR 17 AM 8:29
 HELD
 STATE OF FLORIDA
 BILLING SERVICES

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: Blue Sphere Communications, 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: Principal Office Address: 2600 East Bay Drive, Suite 230, Largo, FL 33771

Mailing Address: P.O. Box 4929, Clearwater, FL 33758

Principal Office Address: Mailing Address:

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.)

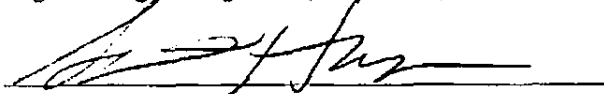
The name and the Florida street address of the registered agent are:

Name Steven L. Hayes

2800 East Bay Drive, Suite 230, Largo, FL 33771

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 (REQUIRED)



(CONTINUED)

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2012 APR 17 AM 8:28
CLERK OF THE COURT
HALL COUNTY, FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member

MGRM

Danny Lan

2600 East Bay Drive

Suite 230

Largo, FL 33771

(Use attachment if necessary)

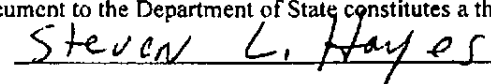
ARTICLE V: Effective date, if other than the date of filing: . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)



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)

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