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T. CLINE
JUN 1 2 2012
EXAMINER

COVER LETTER

TO:

Registration Section

Division of Corpo	rations				
_{subject:} Xnet Me	edia LLC				
SUBJECT:		d Liability Compar	ny		
The enclosed Articles of Or	ganization and fee(s) are s	ubmitted for filing.			
Please return all correspond	ence concerning this matte	er to the following:			
Anthony Me					
		Name of Person			
Xnet Media	LLC				
		Firm/Company			
3200 N. Fed	deral Hwy	•			
		Address			
Boca Raton, I	FL 33431				
	City	/State and Zip Code			
	E-mail address: (to be used fo	6.1		29	20
For further information cond			t nouncation)	EN LA	12 JUN
Anthony Mette		at (305	520-9141	0 ASS	•
Name of Pe	erson	Area Code	& Daytime Telepl	ione Number	3
Enclosed is a check for th	e following amount:				হু ভা
	130.00 Filing Fee & Certificate of Status	\$155.00 Filing Certified Cop (additional copy	у	\$160.00 Filing Fe Certificate of Stat Certified Copy (additional copy is en	us &
R D P	Mailing Address Legistration Section Division of Corporations LO. Box 6327 fallahassee, FL 32314	Registratio Division o Clifton Bu 2661 Exec	f Corporations	rcle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Compar	y is:
Xnet Media LLC	
(Must end with the words "Limited	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of t	he principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3200 N. Federal Hwy Boca Raton, FL 33431	3200 N. Federal Hwy Boca Raton, FL 33431
	tered Office, & Registered Agent's Signature Registered Agent. You must designate an individual orialiether
The name and the Florida street address of	the registered agent are:
Anthony Mette	The second secon
<u> </u>	Name Sal Hwy
3200 N. Feder	ral Hwy 🙀 📽
Florida stre	et address (P.O. Box NOT acceptable)
Boca Raton	_{FL} 33431
	tv. State, and Zin

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)

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: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR Anthony Mette 3200 N. Federal Hwy Boca Raton, FL 33431 (Use attachment if necessary) **ARTICLE V:** Effective date, if other than the date of filing: 6/4/12 (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.)

Anthony Mette

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)