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SECRETARY OF STATE DIVISION OF CORPORATIONS

126.51

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: DIGITAL OUTDOOR LLC 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:
Timur Colak Name of Person
Digital Outdoor, LLC
1600 Tigertail Ave. Address
Miami, FL 33133 City/State and Zip Code + imur & bellsouth. Net E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Timur Colak at (954) 536 - 146 Z Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Status} \text{Certified Copy} \text{(additional copy is enclosed)} \text{Certified Copy} \text{(additional copy is enclosed)}
Mailing Address Street/Courier Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the	Limited Liabil	ity Company is:		
DIGI	TAL	OUTDOOR	LLC	
	Muct and with the v	worde "Limited Lighility Compa	w "LLC " or "LC	

ARTICLE II - Address:

ARTICLE I - Name:

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

1600 Tigettail Avenue same Miami, JFL 33133	Principal Office Address:	Mailing Address:
	1600 Tigettail Avenue Miami, FL 33133	Same

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

1600 Tiger fail Aunue

Florida street address (P.O. Box NOT acceptable)

Miami, FL FL 33/33

City, State, and Zip

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

SECRETARY OF STATE OIVISION OF CORPORATIONS

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Timur Colak 1600 Tigertail Avenue Miami , FL 33133
	
(Use attachment if necessary)	
LE V: Effective date, if other than the fective date is listed, the date must be days after the date of filing.)	e date of filing: (OPTION be specific and cannot be more than five business date
REQUIRED SIGNATURE:	

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)

constitutes a third degree felony as provided for in s.817.155, F.S.)

(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

Timur Colak
Typed or printed name of signee