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EFFECTIVE DATE

2813 NAR 19 AN II: 49 SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

то:		on Section f Corporations	•
SUBJ	FCT•	Ocean Wire	less Labs LLC ited Liability Company
3013	EC1	Name of Lim	ited Liability Company
The er	closed Articl	es of Organization and fee(s) are	submitted for filing.
Please	return all con	respondence concerning this ma	tter to the following:
		Jeffrey	P. Wagner Name of Person
		Ocean w	ireless Labs, LLC
	Physical	LLC Location: 5	Firm/Company 20 Barnett Ln, Lake Worth, FL 33461 yon Way, Boynton Beach, FL 33472 Address
	mailing	Address: 9008 Para	Jon Way, Boynton Beach, FL 33472
			Address
			ity/State and Zip Code
		jpw	7792 @ gmzil.com
		E-mail address: (to be used	for future annual report notification)
For fu	ther informat	tion concerning this matter, pleas	se call:
•	Jeff w	Jagner	or (56) 543-3332
	N	ame of Person	at (561) 543 - 3332 Area Code & Daytime Telephone Number
El-		ala Camaha Callandina ann ann a	
		ck for the following amount:	
≌\$ 125	.00 Filing F	ee \$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

Ocean Wireless Labs, 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:

Mailing Address:

520 Barnett Ln.

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:

Jeffrey P. Wagner

Name

9008 Paragon Way

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

Boynton Beach FL 33472

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

Title: "MGR" = Manager "MGRM" = Managir	ng Member	Name and Address:	
****			<u> </u>
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(Use attachment if ne	cessary)		-
	, if other than the d	late of filing: <u>April 27, 2013</u> . (OPTIC be specific and cannot be more than five bu	ONAL)
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\$ 5.00 Certificate of Status (Optional)