Division of Corporations



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : MCCARTHY, SUMMERS, BOBKO, WOOD, NORMAN, BASS & MELBY,

Account Number: I19990000170 Phone

: (772)286-1700

Fax Number

: (772)283-1803

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

kim@McCarthySummers.com

FLORIDA LIMITED LIABILITY CO. PowerWave Systems, LLC

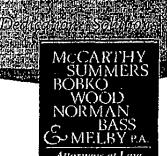
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D. BRUCE



August 23, 2013

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Florida Department of State
Division of Corporations
The Capitol
P.O. Box 6327
Tallahassee, Florida 32399-0250

RE: Articles of Organization of PowerWave Systems, LLC

Ladies and Gentlemen:

With reference to the above company, enclosed please find:

- 1. Letter of Authorization to release name of PowerWave Systems, Inc.
- 2. Articles of Organization for filing.

Kindly fax to the undersigned proof of filing same.

Thank you.

Very truly yours,

Karen L. McGhee, CP, FRP

Certified Paralegal

Email: klm@McCarthySummers.com

/klm

Enclosure

Terence P. McCarthy *
Robert P. Summers *
Noel A. Bobko
Steven J. Wood **
Kenneth A. Norman
Kathryn C. Bass
Nicola J. Boone Melby **
Owen Schultz

Rene S. Iosco Margaret E. Wood

Michael J. McNicholas**

Patricia I. Taylor ††

*Board Certified
Real Estate Lawyer

**Board Certified Wills,
Trusts & Estates Lawyer

***Board Certified
Eider Law Lawyer

***Certified Circuit
Civil Mediator

††Retired



H1300018269

PowerWave Systems, LLC 1127 SW Whisper Ridge Trail Palm City, FL 34990

August <u>23</u>, 2013

Florida Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

RE: PowerWave Systems, Inc.

Document Number: P13000041348

To Whom It May Concern:

As President and owner of the above-referenced corporation, I am authorizing the Florida Department of State to release the name of PowerWave Systems, Inc., to also be filed as PowerWave Systems, LLC. This LLC will also be owned by me.

Very truly yours,

Mickey L. Smith, President PowerWave Systems, Inc.

MLS/klm

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SECRETARY DE STAJE

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

POWERWAVE SYSTEMS, LLC

ARTICLE II - Duration:

The effective date of this company shall be August 23, 2013.

The period of duration for the Limited Liability Company shall:

Continue until December 31, 2063, unless sooner terminated by operation of law or in accordance with the Regulations of the Limited Liability Company, or as reestablished after such primary term for such additional period as is determined by the Members.

ARTICLE III - Address:

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

1127 SW Whisper Ridge Trail, Palm City, FL 34990

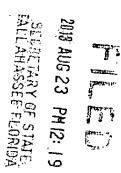
The street address of the principal office of the Limited Liability Company is:

1127 SW Whisper Ridge Trail, Palm City, FL 34990

ARTICLE IV - Registered Agent/Address

The name and address of the registered agent is:

Kenneth A. Norman 2400 SE Federal Highway, Fourth Floor Stuart, FL 34994



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ARTICLE V - Additional Members

Additional Members may be admitted to the Limited Liability Company upon the unanimous vote of the Limited Liability Company's members.

ARTICLE VI - Continuation of Business

Upon the withdrawal of a Member, the remaining members owning at least sixty-six and two-thirds percent (66 2/3rd%) of the interests in the Limited Liability Company then owned by all remaining Members (by written consent of each of such Members) may elect to continue the business.

ARTICLE VII - Management:

The Limited Liability Company is to be managed by a Manager and is therefore a manager-managed company. The name and address of the initial Manager is:

Mickey L. Smith 1127 SW Whisper Ridge Trail Palm City, FL 34990

Dated: August 23, 2013.

Kenneth A. Norman, Authorized Representative

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: POWERWAVE SYSTEMS, LLC
- 2. The name and address of the registered agent and office is:

____Kenneth A. Norman_____ (Name)

2400 SE Federal Highway, Fourth Floor (P.O. Box not acceptable)

Stuart, FL 34994 (City/State/Zip) SECRETARY OF STATES ALLAHASSEE FLORIDA

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, Kenneth A. Norman hereby accepts the appointment as registered agent and agrees to act in this capacity. Kenneth A. Norman further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and it is familiar with and accepts the obligations of its position as registered agent.

Dated: August 23, 2013.

Alan HH

Cenneth A. Norman