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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Effective Date 3/1/14

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DIVISION OF CORPORATION

14 JAN 13 PM 4: 02



COVER LETTER

Division of Corporations	
SUBJECT: Broadband Network Support, 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:	
Richard Vega Jr.	
Name of Person	
Broadband Network Support, LLC	
Firm/Company	
P.O. Box 781123	
Address	
Orlando, Florida 32878	
City/State and Zip Code	
cvega@mybnsco.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Richard Vega, Jr. Name of Person Area Code Daytime Telephone Number	
Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\scrip{\subset}\$\$ \$130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	:d)
Mailing Address Registration Section Street/Courier Address Registration Section	<u> </u>

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

14 JAN 13 PH 4: 02

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited	d Liability Company is:	
BROADBAND NETWORK SUF	PPORT, LLC.	
(M	lust end with the words	"Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address	- -	
The mailing address and	street address of the pr	rincipal office of the Limited Liability Company is:
Principal Office Addre	<u>ss:</u>	Mailing Address:
250 Congress Parkway Dr., Su	ite 471	P.O. Box 781123
Delray Beach, Florida 33445		Orlando, Florida 32878
 	· · · · · · · · · · · · · · · · · · ·	
The name and the Florid	la street address of the I	Name
		Name
-	14766 Burntwood Circle	(P.O. Box NOT acceptable)
-	Uriando	FL 32826
	City	Zip
the place designated capacity. I further ag	in this certificate, I here ree to comply <u>with the</u> pi	accept service of process for the above stated limited liability company a eby accept the appointment as registered agent and agree to act in this rovisions of all statutes relating to the proper and complete performance the obligations of my position as registered agent as provided for in Chapter 605, F.S
	Registered Ager	h's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Richard Vega, Jr.
	250 Congress Park Dr. Suite 471
	Delray Beach, Florida 33445
<u></u>	
	
	<u> </u>
(Use attachment if necessary)	
CLE V: Effective date, if other than the	e date of filing: March 1, 2014 (OPTIONAL) be specific and cannot be more than five business days prior to or 96
CLE V: Effective date, if other than th	
CLE V: Effective date, if other than the iffective date is listed, the date must e of filing.)	
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CLE V: Effective date, if other than the effective date is listed, the date must e of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of (In accordance with se	a member or an authorized representative of a member.
CLE V: Effective date, if other than the effective date is listed, the date must e of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of (In accordance with se constitutes an affirma	a member or an authorized representative of a member. ction 605, 0203 (1) (b), Florida Statutes, the execution of this documention under the penalties of perjury that the facts stated herein are true.
CLE V: Effective date, if other than the effective date is listed, the date must e of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of (In accordance with seconstitutes an affirma I am aware that any factors.)	a member or an authorized representative of a member. ction 605, 0203 (1) (b), Florida Statutes, the execution of this documention under the penalties of perjury that the facts stated herein are true, also information submitted in a document to the Department of State
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Page 2 of 2

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)