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To:

Division of Corporations

Fax Number

Fax Number : (850)617-6383

: (850)878-5368

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCACO0000023 Phone : (950)205-8842

\*\*Enter the email address for this business entity to be used for full ure annual report mailings. Enter only one email address please.\*\*

| Emaj | .1 | Address: |
|------|----|----------|
|      |    |          |

## FLORIDA LIMITED LIABILITY CO. Campaign Recruiter, LLC

| Certificate of Status | 1        |
|-----------------------|----------|
| Certified Copy        | 0        |
| Page Count            | 04       |
| Estimated Charge      | \$130.00 |

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4/23/2015

**COVER LETTER** 

| TO: Registration Section Division of Corporations   |          |                        |
|---|----------|------------------------|
| SUBJECT: Campaign Recruiter, LLC  Name of Limited Liability Company   |          |                        |
| The enclosed Articles of Organization and fee(s) are submitted for filling.   |          |                        |
| Please return all correspondence concerning this matter to the following:   |          |                        |
| Randall R. Kammerdiener Name of Person  |          |                        |
| Campaign Recruiter, LLC Firm/Company  |          |                        |
| 135 Professional Drive, Suite 194 Address   |          |                        |
| Ponte Vedra Beach, Florida 32082  | 2815     |                        |
| City/State and Zip Code  randy@nextwavecommunications.org  E-mail address: (to be used for future annual report notification) | ÅPR      | dental de la constanta |
| For further information concerning this matter, please call:  | 23 AM    | (andard)               |
| Randall R. Kammerdiener at (904 ) 567-2000  Name of Person Area Code Daytime Telephone Number                                 | 4 II÷ 34 | Samuel.                |
| Enclosed is a check for the following amount:   | -        |                        |
| □ \$125.00 Filing Fee   |          |                        |

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

Street/Courier Address
Registration Section
Division of Corporations
Cliffon Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name:<br>The name of the Limited        | i Liability Company is:   |   |   |  |
|---|---|---|---|--|
| Campaign Recruiter, L. (M.                          | C<br>lust end with the words "Limite  | ed Liability Cor  | npany, "L.L.C.,"                                      | " or "LLC.")   |
| ARTICLE II - Address<br>The mailing address and     | s:<br>I street address of the principal   | office of the Li  | mited Liability                                       | Company is:  |
| Principal Office Addre                              | <u>::55:</u>  | Mailing A   | Lddress:  |  |
| 135 Professional Drive<br>Suite 104                 | <u>.</u>  | Suite 104   |   |  |
| Ponte Vedra Beach, FL                               | 32082   | Ponts Ver   | ira Beach, FL 3                                       | 2082   |
| (The Limited Liability (<br>another business entity | ered Agent, Registered Office<br>Company cannot serve as its ow<br>with an active Florida registrat<br>is street address of the registere<br>CT Compan<br>Nan | m Registered A fon.) ed agent are: ation System                 | gent. You must  | designate an individual or   |
|   | 1200 South Pi   | ne Island Road  |   | _  |
| •   | Florida street address (P.O. B  | ox <u>NOT</u> accept  | able)   |  |
|   | Plantation  | FL  | 33324   | _  |
| ·   | City  |   | Zlp   | 2  |
| the place designated capacity. I further as         | l in this certificate, I hereby acc<br>ree to comply with the provision<br>m familiar with and accept the c   | ept the appoints of all statutes obligations of mapter 605, F.S | nent as registere relating to the p y position as reg | stated limited liability company at and agent and agree to act in the proper and complete performance gistered agent as provided for in the property of the content of the performance o |

(CONTINUED)

Page 1 of 2

| Title; "AMBR"   Authorized Member "MGR"   Manager  | Name and Address:  |               |      |
|--|--|---------------|------|
| MGR  | Randall R. Kemmendiener<br>135 Professional Drive, Suite 104<br>Ponte Vedra Hoach, FL 32082  |               |      |
|  |  |               |      |
|  |  |               |      |
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| ective date is listed, the date must be speci  | f filing: (OPTIONAL)  Ific and cannot be more than five business days prior to or 90   | days of       | ler  |
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| EV: Effective date, if other than the date of<br>ective date is listed, the date must be speed<br>of filing.)  | filing: (OPTIONAL)  ific and cannot be more than five business days prior to or 90   | days of       | ler  |
| EV: Effective date, if other than the date of ective date is listed, the date must be special filling.)  EVI: Other provisions, if any.  REQUIRED SIGNATURE:   | filing:  | days of       | ter  |
| E V: Effective date, if other than the date of ective date is listed, the date must be speciof filing.)  E VI: Other provisions, if any.  REOURED SIGNATURE:  Signature of a man  (In accordance with section 605.  constitutes an affirmation under I am aware that any false inform  | ber or an antitorized representative of a member.  Octor on this florida Statutes, the twe out on of this document the penalties of perjury that the facts stated herein are true, attom submitted in a document to the Department of State as provided for in a.\$17.155, F.S.) | Year<br>Carlo | 2015 |
| E V: Effective date, if other than the date of ective date is listed, the date must be special filling.)  E VI: Other provisions, if any.  REOURED SIGNATURE:  Signature of a man (In accordance with section 605. constitutes an affirmation under I am aware that any false information still a secondarily Regular Republik Regular | ber or an anthorized representative of a member.  Octor (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, attom submitted in a document to the Department of State as provided for in a.817.155, F.S.)   | Year of       |      |