

(Requestor's Name)	—
(Address)	—
(Address)	
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	
(business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
·	_
Special Instructions to Filing Officer:	

Office Use Only



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CORPORATE ACCESS, _

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

	CERTIFIED COPY			
XX	РНОТОСОРУ			
	CUS			
XX	FILING	LLC		
((CORPORATE NAME AND DOC	UMENT #)		
((CORPORATE NAME AND DOC	UMENT #)		_
(6	CORPORATE NAME AND DOC	UMENT #)		
(C	ORPORATE NAME AND DOC	UMENT #)		
· (C	ORPORATE NAME AND DOC	UMENT #)		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liabil	ity Company is:			
	_			
Hotspot of Neptune				
(Must cor	ntain the words "Limited L	iability Company	, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street	address of the principal of	fice of the Limite	d Liability Company is:	
<u>Princi</u>	pal Office Address:		Mailing Address:	
150 Willis Lane		150	Willis Lane	
Muttontown NY 11	791		ttontown NY 11791	
<u> </u>				
The name and the Florida street	address of the registered a Corporate Creations N	letwork Inc.		
		Name		
	801 US Highway 1			
	Florida street address (P.O. Box NOT acceptable)			
	North Palm Beach	FL	33408	
	City	State	Zip	
place designated in this certificate urther agree to comply with the p	e, I hereby accept the appor provisions of all statutes rel	intment as register ating to the prope	e above stated limited liability comp red agent and agree to act in this cap r and complete performance of my d as provided for in Chapter 605, F.S	pacity. I luties, and I
	/s/ Krist	en Fundaro		
	Register	ed Agent's Signa	ture (REQUIRED)	
		(CONTINUED)		

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ARTICLE IV-

\$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)

The name and address of each person authorized to manage and control the Limited Liability Company:

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Harris Call Hall's and G
AMBR	Hotspot Cell Holdings, LLC 150 Willis Lane Muttontown NY 11791
MGR	Harmeet Singh 150 Willis Lane Muttontown NY 11791
an effective date is listed, the date must date of filing.) ote: If the date inserted in this block do a document's effective date on the Department. CTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	/S/ Harmeet Singh
This document is I am aware that a	of a member or an authorized representative of a member. s executed in accordance with section 605.0203 (1) (b), Florida Statutes, my false information submitted in a document to the Department of State d degree felony as provided for in s.817.155, F.S.
Harmeet 5	Singh Typed or printed name of signee
\$125.00 Filing Fee for Article	Filing Fees: s of Organization and Designation of Registered Agent