

L97000000447



ACCOUNT NO. : 072100000032

REFERENCE : 335171 - 7127727
Patricia Figure

AUTHORIZATION :

COST LIMIT : \$ 285.00

ORDER DATE : April 17, 1997

ORDER TIME : 10:15 AM

200002153662--6

ORDER NO. : 335171-005

CUSTOMER NO: 7127727

CUSTOMER: Ms. Angela Hawkins
MS. ANGELA HAWKINS

8680 Burning Tree Circle

Largo, FL 33777

DOMESTIC FILING

NAME: NON-PRIME NETWORK, LLC

EFFECTIVE DATE:

☐ ARTICLES OF INCORPORATION
☒ ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY
COMPANY.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Paula K. Kendrick

EXAMINER'S INITIALS:

FILED
97 APR 24 PM 2:32
TALLAHASSEE FLORIDA
RECEIVED
97 APR 24 AM 11:21
DIVISION OF CORPORATION

ON APR 24 1997

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY
COMPANY**

FILED
97 APR 24 PM 2:32
TALLAHASSEE, FLORIDA
STATE

ARTICLE I - Name:

The name of the Limited Liability Company is:
NON-PRIME NETWORK, L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
8419 121st Ave. N.
LARGO, FL 33773

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:
20 Years.

ARTICLE IV - Management:

(check and complete the appropriate statement)

☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

☒ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

**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, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, 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: NON-PRIME NETWORK, L.L.C.

2. The name and address of the registered agent and office is:

LUIS CAMPUZANO

(Name)

8419 121ST AVENUE NORTH

(P.O. Box or Mail Drop Box NOT acceptable)

LARGO, FL 33773

(City/State/Zip)

FILED
97 APR 24 PM 2:32
STATE OF FLORIDA
TALLAHASSEE

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.

BY: 

(Signature)

4/22/97

(Date)

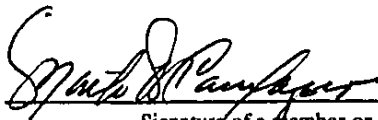
Filing Fee: \$ 35 for Designation of Registered Agent

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of Non-Prime Network, L.C.

deposes and says:

- 1) the above named limited liability company has at least two members
- 2) the total amount of cash contributed by the member(s) is
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ _____.
A description of the property is attached and made a part hereto.
- 4) the amount of cash or property anticipated to be contributed by member(s) is \$ 1000.00.
- 5) the total amount of 2, 3, and 4 is \$ 1500.00.



Signature of a member or authorized representative of a member,
(In accordance with section 608.408(3), Florida Statutes, the
execution of this affidavit constitutes an affirmation under the
penalties of perjury that the facts stated herein are true.)