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DIVISION OF CORPORATIONS

(850)922-4001

FROM: THE COMPANY CORPORATION

076660001006

CEPHAS CONTACT: REGINA

PHONE: (302)575-0440

(302)575-1346

NAME: SFAX, LLC

AUDIT NUMBER..... H97000019860

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

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#### ARTICLES OF ORGANIZATION

**FOR** 

### FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I.

The name of the Limited Liability Company is:

SFAX, LLC.

ARTICLE IL

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

6004 Lincolnwood Court Burke VA. 22015

ARTICLE III.

The period of duration (number of years) of the Limited Liability Company shall be:

Thirty (30) years

ARTICLE IV. (choose one)

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:

Michel Regignano - 6004 Lincolnwood Court, Burke, VA 22015

Z-Recon, Inc. - 6004 Lincolnwood Court, Burke, VA 20015

Prepared by Shelley Dunkelberger, The Company Corporation, 1313 N. Market Street, Wilmington, DE 19801-1151 (302)575-0440

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SECRETARY OF STATE OIVISION OF CORPORATIONS

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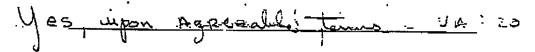
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OR.

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

#### ARTICLE V.

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be:



#### ARTICLE VI.

The right, if given, of the remaining members of the Limited Liability Company to continue the business on the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company shall be:



DIVISION OF CORPORATIONS
97 DEC -2 PM 3: 57

H97000019860.0

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#### AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member and authorized representative of a member of SFAX, LLC deposes and says:

- The above named Limited Liability Company has at least two members.
- 2) The total amount of cash contributed by the member(s) is \$ 200,00.
- 4) The total amount of cash or property anticipated to be contributed by the member(s) is \$ 200,000.00. The total includes amount from #2 and #3 above.

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.)

DIVISION OF CORPORATIONS

# H970000 19860.0

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON PROCESS MAY BE SERVED.

In compliance with Section 43.091, Florida Statutes, the following is submitted:

First, this SFAX, LLC	•
desiring to organize under the laws of the State of Florid place of business located in the city ofBurke, Virginia Munida, has namedLarry Wolfe 200-A John KNox Road, Tallahassee, FL 32303-6643	la with its principal  , xStataxxof  located at
process within Florida.	gent for service of

Having been named to accept service of process for the above stated corporation, at the place designated in this Certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

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Date

This document prepared by: Shelley Dunkelberger, The Company Corporation, 1313 N. Market Street, Wilmington, DE 19801-0511 (302) 575-0440