

L 9900006290

ACCESS
INCORPORATION
SERVICES

Access Incorporation Services, Inc.
21550 Oxnard St, Suite 300
Woodland Hills, CA 91367

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

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09/28/99--01040--003
****285.00 ****285.00

To Whom It May Concern:

Enclosed please find two copies of the Articles of Organization for **Reactance, LLC**.
Also, enclosed please find a check made out to Florida Department of State for the
amount of \$285.

Please send a stamped copy of the articles to:

Access Incorporation Services
21550 Oxnard St, Suite 300
Woodland Hills, CA 91367

Sincerely,

Matthew Cohen
Vice-President
Access Incorporation Services, Inc.

FILED
SEP 29 PM 5:00

L99-6290

Name	CP
Availability	CP
Document Examiner	CP
Updater	CP
Updater Verifier	CP
Acknowledgement	CP
W. P. Verifier	CP

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Reactance, LLC

ARTICLE II - Address:

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

12603 Bent Bay Trail, Jacksonville, FL 32224

ARTICLE III - Duration:

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

Perpetual

ARTICLE IV - Management:

(Check the appropriate box and complete the 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:

Guruswami M. Sridharan, 12603 Bent Bay Trail, Jacksonville, FL 32224

Kardik M. Sridharan, 12603 Bent Bay Trail, Jacksonville, FL 32224

Sushila Sridharan, 12603 Bent Bay Trail, Jacksonville, FL 32224

ARTICLE V - Admission of Additional Members:

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

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SECRETARY OF STATE
FLORIDA

ARTICLE VI - Members Rights to Continue Business:

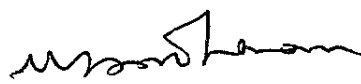
The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII - Affidavit of Membership and Contributions

The undersigned member or authorized representative of a member of _____
Reactance, LLC _____ certifies:

- 1) the above named limited liability company has at least one member;
- 2) the total amount of cash contributed by the member(s) is \$ 10,000 ;
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ 0 ;
(A description of the property is attached and made a part hereto.); and
- 4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is \$ 10,000 .



Signature of a member or an 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.)

Guruswami M. Sridharan

Typed or printed name of signee

Filing Fee: \$250.00 for Articles and Affidavit

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 SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: _____

Reactance, LLC

2. The name and the Florida street address of the registered agent are:

Dr. Kumar Sambamurti

NAME

12603 Bent Bay Trail

Florida street address (P. O. Box NOT ACCEPTABLE)

Jacksonville

FL 32224

CITY, STATE AND ZIP

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.



SIGNATURE

Filing Fee: \$ 35 for Designation of Registered Agent

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09 SEP 29 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA