CAPITAL CONNECTION INC. 417 E. Virgina Street, Shite 1 Tallahassee, Florida 32362 (850) 224-88 0 • 1-810-342 8062 • Flx (550) 232-222

NMB, LLC	3000030525833 -11/23/9901020021 ****125.00 ****125.00
99 NOV 23 PM 12: 35 STATE SECRE LARY OF STATE TALLAHASSEE FLORIDA	Art of Inc. File
Requested by: Name Date Walk-In Will Pick Up	Fictitious Owner Search Vehicle Search Driving Record UCC 1 or 3 File UCC 11 Search UCC 11 Retrieval Courier

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

WMB, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 19501 Biscayne Boulevard, Suite 400, Miami, FL 33180

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Andrew Service Corporation of Florida Name 201 South Biscayne Boulevard, Suite 2900 Florida street address (P.O. Box NOT acceptable) Miami FLCity, 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 as provided for in Chapter 608, F.S..

Andrew Service Corporation of Florida Article IV - Management (Check box if applicable.) The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

> (An additional article must be added if an effective date is requested Signature of a member or an authorized representative of a member (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) Kim A. Rieck Typed or printed name of signee

> > FILING FEES: \$ 100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent 30.00 Certified Copy (OPTIONAL)
> > 5.00 Certificate of Status (OPTIONAL)

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 DEGISTED OF THE

WMB, LLC		and the second of the second o
The name and the Florida stree	et address of the registered agent and office a	nre:
Andrew Service Corp	poration of Florida	
	(Name)	7A.S. 99
	o	LAH T
201 South Biscayne I	Boulevard, Suite 2900	
Florid	a street address (P.O. Box_NOT ACCEPTABLE)	ASSEE PM
Miami	FL 33131-4330	Fo 75 W
	City/State/Zip	TATE RIBA

oper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Andrew Service Corporation of Florida (Signature)

> \$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional)

5.00 Certificate of Status (optional)