

L06000089554

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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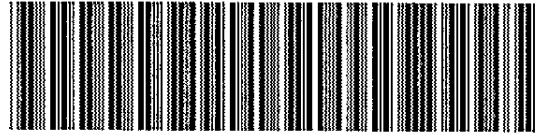
(Business Entity Name)

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS



CORPORATION SERVICE COMPANY

FILED  
06 SEP 28 PM 12:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ACCOUNT NO. : 072100000032  
REFERENCE : 395869 7549874  
AUTHORIZATION : *[Signature]*  
COST LIMIT : \$ 25.00

ORDER DATE : September 12, 2006  
ORDER TIME : 3:40 PM  
ORDER NO. : 395869-016  
CUSTOMER NO: 7549874

DOMESTIC AMENDMENT FILING

NAME: GEMENI GRAPHICS AND SIGNS, LLC

EFFECTIVE DATE:

XXX\_\_ ARTICLES OF CORRECTION  
\_\_\_\_ RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX\_\_ PLAIN STAMPED COPY  
\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea -- EXT# 2914

EXAMINER'S INITIALS: \_\_\_\_\_

06 SEP 28 PM 12:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
**FILED**

ARTICLES OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

**FIRST:** The name of the limited liability company is: GEMINI GRAPHICS AND SIGNS, LLC

**SECOND:** The articles of organization or the application to transact business

**(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)**

Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:


\_\_\_\_\_  
THE INCORRECT STATEMENT: GEMINI GRAPHICS AND SIGNS, LLC  
\_\_\_\_\_  
THE CORRECTED STATEMENT: GEMINI GRAPHICS AND SIGNS, LLC  
\_\_\_\_\_

**OR**

Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated: September 26th, 2006

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member  
GEMINI GRAPHICS AND SIGNS, LLC

\_\_\_\_\_  
Typed or printed name of signee

Filing Fee: \$25.00  
Certified Copy: \$30.00 (optional)

**ARTICLES OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

**FILED**  
06 SEP 15 AM 10:39  
CLERK OF THE STATE  
TREASURY OF FLORIDA

**FIRST:** The name of the limited liability company is:  
GEMINI GRAPHICS AND SIGNS, LLC

**SECOND:** The articles of organization or the application to transact business

**(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)**

Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:  
Current name is Gemini Graphics and Signs, LLC name needs to be corrected because it was misspelled  
by the person who submitted the order. Correct name is: GEMINI GRAPHICS AND SIGNS, LLC

**OR**

Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Dated: September 14, 2006

/s/ Tracy J. Askew

Signature of a member or authorized representative of a member

Tracy J Askew

Typed or printed name of signee

Filing Fee: \$25.00  
Certified Copy: \$30.00 (optional)

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L06000089554  
FILED 8:00 AM  
September 12, 2006  
Sec. Of State  
nculligan

**Article I**

The name of the Limited Liability Company is:  
GEMINI GRAPHICS AND SIGNS, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
800 ELM AVE.  
SANFORD, FL. US 32771

The mailing address of the Limited Liability Company is:  
800 ELM AVE.  
SANFORD, FL. US 32771

**Article III**

The purpose for which this Limited Liability Company is organized is:  
ANY AND ALL LAWFUL BUSINESS.

**Article IV**

The name and Florida street address of the registered agent is:  
CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL. 32301

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.

Registered Agent Signature: LAURA R DUNLAP

**Article V**

The name and address of managing members/managers are:

Title: MGRM  
TRACY J ASKEW  
800 ELM AVE.  
SANFORD, FL. 32771 US

Signature of member or an authorized representative of a member

Signature: TRACEY J ASKEW

L06000089554  
FILED 8:00 AM  
September 12, 2006  
Sec. Of State  
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