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Florida Department of State
Division of Corporations
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To: Division of Corporations
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From: Account Name : CSH SERVICES, LLC
Account Number : I20070000160
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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Lindy The Laminator L.L.C.

Certificate of Status	0
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ARTICLES OF ORGANIZATION
FOR A FLORIDA LIMITED LIABILITY COMPANY
In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:
LINDY THE LAMINATOR L.L.C.

ARTICLE II ADDRESS

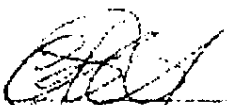
The mailing address and street address of the principal office of the Limited Liability Company is:
11510 NW 20TH CT
PLANTATION, FLORIDA 33323

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

The name and the Florida street address of the registered agent are:
LINDOLPH CAMPBELL
11510 NW 20TH CT
PLANTATION, FLORIDA 33323

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Having been named as registered agent 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..

x 
LINDOLPH CAMPBELL / Registered Agent's signature

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PAGE 2 LINDY THE LAMINATOR L.L.C.

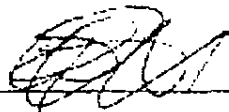
ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS (optional)

MANAGING MEMBER:
LINDOLPH CAMPBELL
11510 NW 20TH CT
PLANTATION, FLORIDA 33323

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TALLAHASSEE FLORIDA

x 

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.

LINDOLPH CAMPBELL
Typed or printed name of signee