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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : CSH SERVICES, LLC
Account Number : I2007C000160
Phone : (800) 494-3124
Fax Number : (561) 455-9885

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FLORIDA LIMITED LIABILITY CO.
Volume Records LLC

Certificate of Status	0
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G. MCLEOD

AUG. 27 2010

EXAMINER

H100001913183

**ARTICLES OF ORGANIZATION FOR A
FLORIDA LIMITED LIABILITY COMPANY**
In compliance with Chapter 608 and/or 621, F.S.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE I NAME

The name of the Limited Liability Company is:

VOLUME RECORDS LLC

ARTICLE II ADDRESS

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

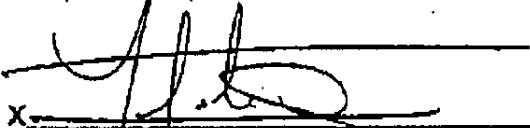
157 SE 10TH AVE
HIALEAH, FLORIDA 33010

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT SIGNATURE**

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

JEFF POLICARD
157 SE 10TH AVE
HIALEAH, FLORIDA 33010

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 _____
JEFF POLICARD / Registered Agent's signature

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VOLUME RECORDS LLC

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

JEFF POLICARD

157 SE 10TH AVE

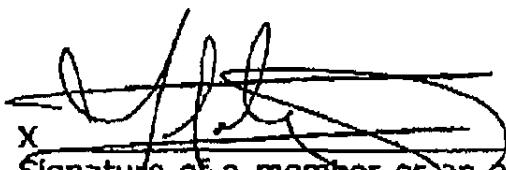
HIALEAH, FLORIDA 33010

MANAGING MEMBER

GAETAN POLICARD

157 SE 10TH AVE

HIALEAH, FLORIDA 33010



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.

JEFF POLICARD
PRINTED NAME OF SIGNEE