

C T Corporation	System			
Requestor's Name 660 East Jeffers	on Street			
Address Tallahassee, FL	A			
City State Zip	Phone			
•	ATION(S) NAME	400	000272173 -12/24/9801020 *****70.00 ***	44 017 **70.00
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Acknowledgment				
W.P. Verifier				

CR2E031 (1-89)

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	Discount Labels, Inc. (Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION", or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2.	. Indiana 3. 55–1119834 (State or country under the law of which it is incorporated) (FEI number, if applicable)
4.	4/20/64 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")
6.	Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.156, F.S.))
7.	P100.TBox:1709,
	70 00
	New Albany, Indiana 47151 (Current mailing address)
	(Outrent Hailing address)
8.	Custom Tabel Producer
	(Purpose(s) of corporation authorized in home state or country to be carried out in the state of
	Florida)
^	Name and street all the ST 14 and 15
9.	Name and street address of Florida registered agent:
	Name: C T Corporation System
	C/O C T Corporation System, 1200 South Pine Office Address: Island Road
	Plantation, Florida, 33324
	(Zip Code)
Ha de: fun	Registered agent acceptance: aving been named as registered agent and to accept service of process for the above stated corporation at the place signated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I ther agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, of I am familiar with and accept the obligation of my position as registered agent.
	C T Corporation System
	Mary Radams
	(Registered agent's signature) (Officer)
	ASSISTANT SECRETARY
(F1	L - 2189 - 11/16/94) (Type Name and Title of Officer)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

havi	ing custody	y of corpora	ate records in the jurisdiction under the law of which	it is incorporate	d.
12.	Names an	nd address	es of officers and/or directors:		
A.	DIRECT	rors			
	C	Chairman: _	Larry L. Gellerstedt, TIT		
			2485 West Wesley Road	-	
		_	Atlanta, GA 30309		
	V	/ice Chairn	nan: W. Frederick Conway, Sr.		
	P	Address:	P.O. Box 893		
			Nèw-Albany, IN 47150	-	_
	Ε	Director:	Richard G. Smith		
	P	Address:	303 Chase Lane	-	- 5
		_	Marietta, GA 30068		
	Ε	Director:		-	
	F	Address:		-	-
				98 DEC 24 AM IO: 19 SECRETARY OF STATE TALLAHASSEE FLORIDA	
B.	OFFICE	ERS		CAR	1
	F	President:	Allen C. Conway	ASSE	
			5810 Moser Knob Road	TANY OF STATE	-
		_	Floyds Knobs, IN 47119	PRIDE	· •
E	xecutive \	/ice Presid	ent: Winifred B. Arledge	*	
	A	Address: _	5780 Moser: Knob Road		
		_	Floyds Knobs, IN 47119		
		Secretary:_	Dawn M. Gray		
	A	Address: _	2100 RiverEdge Pkwy., Suite 1200		

Executive Vice President: Sol A. Arledge

Atlanta, GB 30328

5780 Moser Knob Road Floyds Knobs, IN 47119

Treasurer:	John H. Karr			
Address: _	2100 RiverEdge Parkway, Suite 1200			
_	Atlanta, Georgia 30328			
NOTE: If necessary, yo and/or directors.	u may attach an addendum to the application listing additional officers			
13. Junk				
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)				
14. Bawn M. Gray,	-Scoretory John H. KARR, Transver			
14. Dawn M. Gray, Secretary John H. KARR, Transcription (Typed or printed name and capacity of person signing application)				

98 DEC 24 AM ID: 19
SECRETARY OF STATE
TALLAHASSEE FLORIDA

STATE OF INDIANA

OFFICE OF THE SECRETARY OF STATE

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, SUE ANNE GILROY, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

DISCOUNT LABELS, INC.

filed Articles of Incorporation on April 20, 1964, and is a corporation duly organized and existing under and by virtue of the laws of the State of Indiana.

I further certify this corporation has filed its most recent annual report required by Indiana law with the Secretary of State, or is not yet required to file such annual reports, and that Articles of Dissolution have not been filed.

In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this Eighteenth day of December, 1998.

SEATE ON TOTAL ON THE SEATE OF THE SEATE OF

Sue Anne Silroy, Secretary of State

Deputy