

**L01000015049**

GOVONI HARRINGTON ASSOCIATES  
INTERNATIONAL ACCOUNTANT AND IMMIGRATION CONSULTANTS

AVENUE A, NW - SUITE 102  
WINTER HAVEN, FL 33881-4626  
TEL: (863) 294-5925 FAX: (863) 297-5395  
e-mail: govoni@compuserve.com

August 28, 2001

300004564623--6  
-08/30/01--01076--009  
\*\*\*\*125.00 \*\*\*\*125.00

Department of State  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Re: Premiere Printer Supplies LLC**

Gentlemen:

Enclosed please find an original and one copy of the Articles of Organization for the referenced company and a check in amount of \$125.00 to cover all filing fees and the cost of Designation of Registered Agent..

Please do not hesitate to call with any questions.

Sincerely,

*Brian R. Govoni, CEO*

Brian R. Govoni

FILED  
01 AUG 30 PM 5: 02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**L01-15049**

*OK*

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

PREMIERE PRINTER SUPPLIES LLC

## ARTICLE II - Address:

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

505 AVENUE A, NW-SUITE 102, WINTER HAVEN, FLORIDA 33881

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

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

BRIAN R. GOVONI

Name

505 AVENUE A, NW-SUITE 102

Florida street address (P.O. Box NOT acceptable)

WINTER HAVEN, FL 33881

City, 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.*

Registered Agent's Signature

## 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.)

MICHAEL J. NEAL

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)

FILED  
01 AUG 30 PM 5:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA