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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 205-0383

From: Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

RECEIVED
02 APR - 1 PM 2: 00
DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

PRINT SOLUTION DIGITAL, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

FILED
02 APR - 1 AM 9: 55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: **PRINT SOLUTION DIGITAL, LLC**

ARTICLE II - Address:

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

**1301 W. 68th STREET, SUITE C-1
HIALEAH, FLORIDA 33014**

ARTICLE III - The Limited Liability Company is to be managed by a manager or managers and is, therefore, a manager - managed company. The names and addresses of such managers who are to serve as managers are:

Name: Beatriz Palacio 50%
Addr: 1280 NW 154th Lane
Pembroke Pines, Florida 33028

Name: Olga Lucia Gonzalez 50%
Addr: 1280 NW 154th Lane
Pembroke Pines, Florida 33028

(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.)

Beatriz Palacio
Signature of member or authorized representative of a member
Beatriz Palacio
Printed name

4-1-02
Date

ARTICLE IV - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent is:

Beatriz Palacio
Name
1280 NW 154th Lane
Florida street address
Pembroke Pines, Florida 33028
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 for my position as registered agent as provided for in Chapter 608, F.S.

Beatriz Palacio
Registered Agent's Signature
Y:\ww\art00\art-LLC

4-1-02
Date

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02 APR 02 AM 9:55
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TALLAHASSEE, FLORIDA