L02000014243

Registration Section Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

600005462716--5 -05/06/02--01079--006 ****125,00 ****125.00

Dear Sir or Madam,

Please find enclosed the articles of organization for a new limited liability company. The name of the company is Proof Positive Document Services. My name is Karen Cabai, and I can be reached at

14950 Blackbird Lane Fort Myers, Florida 33919 (941) 823-0103

If you have any questions, please do not hesitate to contact me. Thank you so much for your help in this matter.

Sincerely,

Karen Cabai

Proof Positive Document Services

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SECRETARY OF STATE

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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 13, 2002

KAREN CABAI 14950 BLACKBIRD LANE FORT MYERS, FL 33919

SUBJECT: PROOF POSITIVE DOCUMENT SERVICES

Ref. Number: W02000013692

We have received your document for PROOF POSITIVE DOCUMENT SERVICES and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain both the street address of the principal office and the mailing address of the entity.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 602A00030252

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SECRETARY OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I—Name:

Proof Positive Document Services, L.L.C.

ARTICLE II—Street Address of Principal Office:

413 Grenier Drive Fort Myers, Florida 33903

Mailing Address

413 Grenier Drive Fort Myers, Florida 33903

ARTICLE III—Registered Agent, Registered Office, & Registered Agent's Signature:

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

Karen Cabai name

14950 Blackbird Lane
Florida street address (P.O. Box NOT acceptable)

Fort Myers, Florida 33919 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 am familiar with an 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 i	fabi	nlicable.`

The Limited Liability Company is to be managed by one or more managers and is therefore, a manager-managed company.

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.

Karen Cabai

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)