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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

SUBJECT: IMV Films, LLC

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Virginia E. Clapp, Esq. Scruggs & Carmichael, P.A. 4041 NW 37th Place, Suite B Gainesville, FL 32606

For further information concerning this matter, please call:

Virginia E. Clapp at (352) 374-4120, ext. 328

Enclosed is a check for the following amount:

\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)



ARTICLES OF ORGANIZATION OF IMV Films, LLC

A FLORIDA LIMITED LIABILITY COMPANY

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I — Name:

The name of the Limited Liability Company is: IMV Films, LLC

ARTICLE II — Address:

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

Street Address:

IMV Films, LLC

17912 N.W. 112th Blvd.

Alachua, FL 32615

Mailing Address:

IMV Films, LLC P.O. Box 1991 Alachua, FL 32616

Article III — Registered Agent and Registered Office

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

Registered Agent

Virginia E. Clapp

4041 NW 37th Place - Suite B Gainesville, Florida 32606

Registered Office:

4041 NW 37th Place - Suite B

Gainesville, Florida 32606

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this 8th day of April, 2005.

Signature of authorized representative
Typed or printed name: Virginia E. Clapp

STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. 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 under Chapter 608, Florida Statutes.

(In accordance with section 608.408(3), Florida Statutes, the execution of this statement constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Signature of Registered Agent

Typed or printed name: Virginia E. Clapp

