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Florida Department of State
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To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : WILLIAMS SCHIFINO ANGIONE & STEADY, P.A.
Account Number : I20000000216
Phone : (813)221-2626
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LIMITED LIABILITY COMPANY

Freedman Office Supply, LLC

Certificate of Status	0
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**ARTICLES OF ORGANIZATION
OF
FREEDMAN OFFICE SUPPLY, LLC**

A Florida Limited Liability Company

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

ARTICLE I — Name:

The name of the limited liability company (hereinafter referred to as the "Company") is:

FREEDMAN OFFICE SUPPLY, LLC

ARTICLE II — Address:

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

3935 W. Cypress Street
Tampa, Florida 33607

ARTICLE III — Registered Agent:

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

William J. Schifino, Sr.
Williams Schifino Mangione & Steady, P.A.
One Tampa City Center, Suite 2600
Tampa, Florida 33602

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ARTICLE IV — Management:

The Company is to be managed by its member(s), and is therefore a member-managed limited liability company.

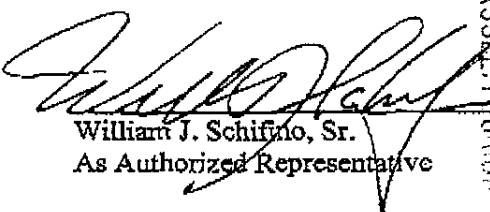
ARTICLE V — Operating Agreement:

Any Operating Agreement, as defined in Section 608.402(24) of the Florida Limited Company Act (the "Act"), relating to this Company must be in writing and signed by all of the members.

ARTICLE VI — Limitation on Agency Authority of Members:

Pursuant to section 608.4235 of the Act, no member of the Company shall be an agent of the Company solely by virtue of being a member.

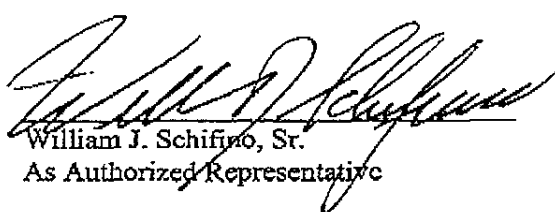
IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 29th day of December, 2005.


William J. Schifano, Sr.
As Authorized Representative

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


William J. Schifano, Sr.
As Authorized Representative

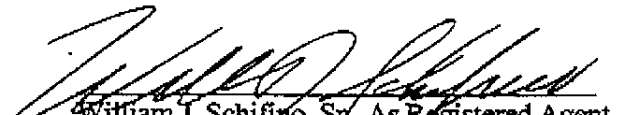
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STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the designation as registered agent to accept service of process for FREEDMAN OFFICE SUPPLY, LLC at the place designated in this statement below. 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 WITNESS WHEREOF, I have signed this Statement Accepting Appointment as Registered Agent effective as of the 29th day of December, 2005.


 William J. Schifano, Sr., As Registered Agent
 Williams Schifano Mangione & Steady, P.A.
 One Tampa City Center, Suite 2600
 Tampa, Florida 33602

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.


 William J. Schifano, Sr.

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