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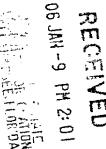


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CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 222-1173

FILING COVER SHEET ACCT. #FCA-14

Examiner's Initials

CONTACT:	TRACY SPE	AR	
DATE:	01/09/06		- ٠
REF.#:	001260,46550		The second secon
CORP. NAME:	CHRISTOPI	HER L DUNCAN, LLC	THE PRINTS
		() ARTICLES OF AMENDMENT () TRADEMARK/SERVICE MARK	() ARTICLES OF DISSOLUTION
() FOREIGN QUALIFIC	CATION	() LIMITED PARTNERSHIP	(XX) LIMITED LIABILITY
() REINSTATEMENT		() MERGER	() WITHDRAWAL
() CERTIFICATE OF C	ANCELLATION		
() OTHER:			
STATE FEES PR	EPAID WI	TH CHECK# <u>49997</u> FOR \$ <u>1</u>	<u>25.00</u>
AUTHORIZATIO	ON FOR AC	CCOUNT IF TO BE DEBITI	ED:
	COST LIMIT: \$		
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() CERTIFICATE OF	STATUS	•	

ARTICLES OF ORGANIZATION FOR FLORIDA LÍMITED LIABILITY COMPANY

DIDITI COMPANY
office of the Limited Liability Company is:
Mailing Address:
3233 W CYPRESS STAPT 3 复复 安
TAMPA, FL 33607
e, & Registered Agent's Signature: ed agent are:
agent are.

NOT acceptable)

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, Florida Statutes..

City, State, and Zip

TAMPA, FL 33607

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

ARTICLE IV - Manager(s) or Managing Member(s

The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:		
"MGR" = Manager "MGRM" = Managing Member			
	CHRISTOPHER L DUNCAN		
MGRM	3233 W CYPRESS STAPT 3		
	TAMPA, FL 33607		
The second secon			
			
•			
(Use attachment if necessary)			
NOTE: An additional article must be added if an eff	ective date is requested.		
REQUIRED SIGNATURE:	•		
REQUIRED SIGNATURE.			
Christopher L. Dince	m		
Signature of a member or an authorized represe			
(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.)			
_CHRISTOPHER L DUNCAN			
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)