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(Requestor	's Name)		
(Address)			
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(City/State	Zip/Phone #)		
PICK-UP	WAIT MAIL		
(Business Entity Name)			
(Document Number)			
Certified Copies C	Certificates of Status		
Special Instructions to Filing Officer:			

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J. BRYAN MAR 2.7 2006

COVER LETTER

TO: Registration Se Division of Co				
SUBJECT: Panton	e Printing			
	(Name of Limite	d Liability Compa	ny)	
The enclosed Articles o	f Organization and fee(s) are s	ubmitted for filing		
Please return all corresp	ondence concerning this matte	er to the following:		
Francisco A	Arles Aparicio			<u> </u>
	(Name of Person)		
Pantone P	rinting			- R 2
- · · · · · · · · · · · · · · · · · · ·		(Firm/Company)		\$ 50°
2500 nw 7	9th Ave Suite 220			があった。
		(Address)		ORIGO
Doral, FL	33122			7
	(City	/State and Zip Code))	*
For further information	concerning this matter, please	call:		
Alyssa Soto	_	at (_786)	436-479	
(Name	of Person)	(Area Code	& Daytime T	elephone Number)
Enclosed is a check for	or the following amount:			
S125.00 Filing Fee	S130.00 Filing Fee & Certificate of Status	S155.00 Fit Certified Copy (additional copy is		\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division of Clifton Bu 2661 Exec	of Corporatio	ns Circle

ARTICLE I - Name:	The state of the s
The name of the Limited Liability Compa	ny is:
Pantone Printing, LLC	in the second se
	"Limited Company" or their abbreviation "LLC," or "L.C.,")
	· ·
ARTICLE II - Address:	the animainal affice afthe Limited Lightlity Company is
The mailing address and street address of	the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
2500 NW 79th Ave Suite 220	2500 NW 79th Ave Suite 220
(The Limited Liability Company cannot serve as its own	Doral, FL 33122 stered Office, & Registered Agent's Signature: a Registered Agent. You must designate an individual or another
ARTICLE III - Registered Agent, Regis	stered Office, & Registered Agent's Signature: a Registered Agent. You must designate an individual or another
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	stered Office, & Registered Agent's Signature: n Registered Agent. You must designate an individual or another f the registered agent are:
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Francisco Arles Aparici	stered Office, & Registered Agent's Signature: n Registered Agent. You must designate an individual or another f the registered agent are:
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Francisco Arles Aparici	stered Office, & Registered Agent's Signature: In Registered Agent. You must designate an individual or another If the registered agent are:
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Francisco Arles Aparici 580 Labaron Drive	stered Office, & Registered Agent's Signature: In Registered Agent. You must designate an individual or another If the registered agent are:
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Francisco Arles Aparici 580 Labaron Drive	stered Office, & Registered Agent's Signature: a Registered Agent. You must designate an individual or another f the registered agent are: Name eet address (P.O. Box NOT acceptable)
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Francisco Arles Aparici 580 Labaron Drive Florida str Miami Springs, FL 33168	stered Office, & Registered Agent's Signature: a Registered Agent. You must designate an individual or another f the registered agent are: Name eet address (P.O. Box NOT acceptable)

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

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	
	Name and Address:
RTICLE V: Effective date, if other than the an effective date is listed, the date must be or 90 days after the date of filing.)	e date of filing: (OPTIONAL) be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	<i></i>
	- Admin
Company of a mamb	er or an authorized representative of a member.
(In accordance with so of this document cons	ection 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury herein are true.)
, , ,	
	yped or printed name of signee
•	NESS OF Everyon warren or arBrea

Filing Fces:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)