Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

Account Name : CLARION VENTURES, INC.

Account Number : 120030000026 Phone : (623)465-8636 Fax Number : (623)465-8640

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Computers & Inks Unlimited LLC

Certificate of Status 0

Certified Copy 0 Page Count 01 \$125.00

Estimated Charge

Corporate Filing Menu

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - N The name of the	ame: Limited Liability Company is:		
Computers & Inks	Unlimited LLC		
ARTICLE II The malling add	Address: ress and street address of the prin	cipal office of the Limited	Liability Company i
Principal Office	: Address:	Mailing Address:	
305 East Int'l Spdwy Blvd		305 East Inti Spdwy Sivd	
DeLand Fl, 32724		DeLand FI, 32724	
	Registered Agent, Registered Ce Florida street address of the reg Eugene Kahng Name 46 Burbank Dr Florida street address (P.O. to palm Coast, City, State, and	istered agent are: Box NOT acceptable) FLORIDA 32137	SECRETARY OF STATE DEVISION OF COURSE AND SECRETARY OF STATE OF ST

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..

Registered Agent's Signature

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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" = Manage		
"MGRM" = Mana _l	ging Member	
MGR		Eugene Kahng
		46 Burbank Orlve
		Palm Coast FI, 32137
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and the little	_ "	
Contract to the contract of	• •	
Use attachment if	necessary)	
,	•	
sover eller	anal antista m	
Oie: An addin	onst stucie mes	it be added if an effective date is requested
REQUIRED SIGN	ATURE:	
	Eugene A	alam
Signatu	ire of a member or	an authorized representative of a member.
(In acc	ordance with section	608.408(3), Florida Statutes, the execution
of this	document constitutes	s an affirmation under the penalties of perjury
that the	facts stated herein r	
	Eugene K	anac or printed name of signee
	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 5.00 Certificate of Status (Optional)

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