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Florida Department of State  
Division of Corporations  
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## To:

Division of Corporations  
Fax Number : (850) 617-6383

## From:

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
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## FLORIDA/FOREIGN LIMITED LIABILITY CO.

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**ARTICLES OF ORGANIZATION FOR  
FLORIDA LIMITED LIABILITY COMPANY OF**

**ALTERNATIVE PAPER SOURCE LLC**

**ARTICLE I**

**The name of the Limited Liability Company shall be: ALTERNATIVE  
PAPER SOURCE LLC**

**ARTICLE II**

**The Company is organized for any legal and lawful purpose for  
which a limited liability company may be organized pursuant to the Act.**

**ARTICLE III**

**The mailing address and street address of the principal office of the  
Limited Liability Company: 11313 KNIGHTS GRIFFIN, THONOTOSASSA,  
FLORIDA 33592**

**ARTICLE IV**

**The name and the Florida street address of the registered agent:  
ROBERT CARR, 11313 KNIGHTS GRIFFIN, THONOTOSASSA,  
FLORIDA 33592**

**ARTICLE V**

**The name of the Managing Member shall be: ROBERT CARR**

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CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE/MEMBER/REPRESENTATIVE

ALTERNATIVE PAPER SOURCE LLC  
(Name of Company)

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization, 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.

Robert Carr P.A.  
Registered Agent

[Signature]  
Signature of a member or an authorized representative of a member

(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.)

Robert Carr  
Typed or printed name of signer

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