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FILED SECRETARY OF STATE DIVISION OF COSPORATION December 9, 2008

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

To Whom It May Concern:

Enclosed please find copies of Articles of Organization and Designation of Registered Agent for my company, Paper Bag Productions, LLC. My name is Ilene Kramer Bernstein and my address is: 3256 St. Annes Drive, Boca Raton, Florida 33496. My daytime telephone number is: (561) 715-0701. I have enclosed a check for \$155.00 for the filing fee and a Certified Copy of the documents.

Thank you,

Sincerely,

Ilene Kramer Bernstein

Sline Kramer Bernstein

COVER LETTER

Section orporations	
Paper Bag Pr	-oductions, LLC
	Liability Company)
of Organization and fee(s) are sul	omitted for filing.
pondence concerning this matter	to the following:
Ilene Kram	er Bernstein
(N	ame of Person)
Paper Bag	Productions, LLC
(F	rm/Company)
3256 St. A	Innes Drive
	(Address)
Boca Rat	on, Florida 33496
(City/S	tate and Zip Code)
concerning this matter, please c	all:
ramer Bernstein	1(561) 715-0701
e of Person)	(Area Code & Daytime Telephone Number)
or the following amount:	,
\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address Periotration Section	Street/Courier Address Periotration Socion
Division of Corporations	Registration Section Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle
	Paper Bag Proper Bag P

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

Paper Bag Productions, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
3256 St. Annes Drive	3256 St. Annes Drive Boca Raton, Florida
Boca Raton, Florida 33496	33496
Name 3 a 5 6 St. Av Florida street addi	egistered agent are: mer Bernstein nnes Drive ress (P.O. Box NOT acceptable) ton, Florida 33494

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, F.S..

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:

"MGRM" = Managing Member		
MGRM ———	Tiene Kramer Bemstein 3256 St. Annes Drive Boca Raton, Florida 33491	'p
	·	
(Use attachment if necessary)		
(Use attachment if necessary) LE V: Effective date, if other than to	the date of filing: (OPTIONAL)	4

ARTIC (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED 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.)

Ilene Kramer Bernstein

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)