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| Special Instructions to Filing Officer: | |
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Office Use Only



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C. LEWIS

AUG - 4 2009

EXAMINER

NEXSEN PRUET

Tori L. Davis Legal Assistant

July 30, 2009

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

Re: PRP Products, LLC

Dear Sir or Madam:

Enclosed please find the Articles of Organization for PRP Products, LLC along with this firm's check to cover the filing fee. Please return a filed-stamped copy in the envelope provided. If you have any questions I can be reached at 1-800-234-6757. Thank you for your assistance.

Charleston

Very truly yours,

Charlotte

Columbia

Greensboro

Tori L. Davis

Greenville

Hilton Head

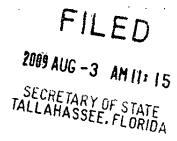
Enclosures

Myrtle Beach

Raleigh

COVER LETTER

| 10. | Division of C | | | | | |
|---------|-------------------|---|-----------|--|--|---|
| SUBJI | ECT: | | PRP Pr | oducts, L | LC | |
| | | Name of Limit | ed Liab | ility Com | pany | |
| The en | closed Articles | of Organization and fee(s) are | submitt | ed for fili | ng. | |
| Please | return all corres | pondence concerning this mat | ter to th | e followi | ng: | |
| | | B. Joe | | nmire, E | squire | |
| | | | Name o | of Person | | |
| | | N | exsen P | ruet, LL(| <u> </u> | |
| | | , | Firm/C | ompany | | |
| | | P. | O. Drav | ver 10648 | 3 | • |
| | | | Add | dress | | |
| | | Gr | eenville | , SC 296 | 03 | |
| | | Cit | y/State a | ınd Zip Ce | de | |
| | | jstoude E-mail address: (to be used | | nexsenpr | | n) |
| For fur | ther information | n concerning this matter, please | | | • | , |
| | | oudenmire, Esquire | _ at (| 864 | _) | 370-2211 Telephone Number |
| | Name | e of Person | | Area Co | de & Daytime | Telephone Number |
| Enclos | sed is a check f | for the following amount: | | | | |
|]\$125. | 00 Filing Fee | \$\infty\$\$130.00 Filing Fee & Certificate of Status | Ce | rtified C | ing Fee & opy opy is enclosed | \$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 | | Registra Divisio Clifton 2661 E | Courier Additation Section of Corporat Building xecutive Century Section FL 3236 | tions der Circle |



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| | PRP Proc | ucts, LLC | |
|--|---|---|---------------------|
| (Must er | | Liability Company," "L.L.C.," or "LLC.") | |
| ARTICLE II - Addre | | | |
| | | e principal office of the Limited Liability | Company is |
| _ | | • | |
| Principal Office Add | ress: | Mailing Address: | |
| 1016 W. Church Street | | 1016 W. Church Street | |
| Orlando, FL 32854 | | Orlando, FL 32854 | _ |
| (The Limited Liability Compa- business entity with an activ | any cannot serve as its own : e Florida registration.) | ered Office, & Registered Agent's Sign Registered Agent. You must designate an individual or the registered agent are: | ature: • mother |
| (The Limited Liability Compa- business entity with an activ | any cannot serve as its own e Florida registration.) rida street address of | Registered Agent. You must designate an individual or | ature: mother |
| (The Limited Liability Compa- business entity with an activ | any cannot serve as its own e Florida registration.) rida street address of C T Corp | Registered Agent. You must designate an individual or the registered agent are: | ature: mother |
| (The Limited Liability Compa- business entity with an activ | any cannot serve as its own e Florida registration.) rida street address of C T Corp | Registered Agent. You must designate an individual or the registered agent are; oration System | ature: - another |
| (The Limited Liability Compa- business entity with an activ | any cannot serve as its own e Florida registration.) rida street address of C T Corp N 1200 South | Registered Agent. You must designate an individual or the registered agent are: oration System | ature: - another |
| (The Limited Liability Compa- business entity with an activ | any cannot serve as its own e Florida registration.) rida street address of C T Corp N 1200 South | Registered Agent. You must designate an individual or the registered agent are: oration System ame Pine Island Road (P.O. Box NOT acceptable) | ature: mother |
| (The Limited Liability Compa- business entity with an activ | any cannot serve as its own e Florida registration.) rida street address of C T Corp N 1200 South Florida street address Plantation | Registered Agent. You must designate an individual or the registered agent are: oration System ame Pine Island Road | ature: - another |

(CONTINUED)

Registered Agent's Signature (REQUIRED)
Michael Seraphin Asst. Secretary

Page 1 of 2

FILED

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

2009 AUG -3 AM 11: 15

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

SECRETARY OF STATE

| 10 40 D H = 3.4 | | Name and Address: | TALLAHASSE |
|---|---|--|--------------------------------|
| "MGR" = Mana | • | | |
| WGRW - Ma | naging Member | | |
| MGRM | | Jeffrey A. Cooper | |
| | | 60 Pelham Davis Circle | |
| | | Greenville, SC 29615 | |
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| | | date of filing: | (OPTIONAL) |
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| LE V: Effective | e date, if other than the isted, the date must b | | |
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| LE V: Effective fective date is li days after the c | e date, if other than the isted, the date must be date of filing.) IGNATURE: Signature of a member of this document cons | e specific and cannot be more that L The croise of an authorized representative of a ction 608.408(3), Florida Statutes, the extitutes an affirmation under the penalties | member. |
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| LE V: Effective fective date is li days after the c | e date, if other than the isted, the date must be date of filing.) IGNATURE: Signature of a member of this document constitute facts stated here. | e specific and cannot be more that L The croise of an authorized representative of a ction 608.408(3), Florida Statutes, the extitutes an affirmation under the penalties | n five business days prometer. |

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

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)