FROM : LAZARUS

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Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAMARUS CORPORATE FILING SERVICE, INC.

Account Number: 120000000019
Phone: (305)552-5973

Fax Number : (305)220-1440

Effective Date 01/01/10

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

FLORIDA/FOREIGN LIMITED LIABILITY CO. C. GRAPFIICS LLC

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ALLAHASSEE, PLORIDA

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J. BRYAN

DEC 21 2009

Electronic Filing Menu

Corporate Filing Menu

Help EXAMINER

ARTICLE 1 - Name: The name of the Limited Liability Company in: (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:
8959 NW. 111 TELL.	8959 NW 111 Tell
HIRLEATT GALDEN, FL	HINLEAN GARGEN, FL.

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

Having been named as registered agent and to accept service of process for the above stated limited //ability 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)

Oriala.	in the second of
<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	_
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(Use attachment if necessary)	
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days after the date of filing.) REQUIRED SIGNATURE: Signature of a month	per or an authorized representative of a member.
days after the date of filing.) REQUIRED SIGNATURE: Signature of a month	per or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury

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)