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7. OLIME JAN 1 2 2010

EXAMINET

COVER LETTER

то:	Registration of	on Section f Corporations		
SUBJI	ECT:	PrimeNet Dire	ect Marketing Solutions, LLC	
		Name of Limi	ted Liability Company	
The en	closed Articl	es of Organization and fee(s) are	submitted for filing.	
Please	return all cor	respondence concerning this mat	tter to the following:	
		Ма	rk W. Siler, Esq.	
			Name of Person	
		Weiss E	Berzowski Brady LLP	
			Firm/Company	
		700 North V	Vater Street, Suite 1500	
			Address	
		Milw	raukee, WI 53202	-1 N
		Ci	ty/State and Zip Code	200
			/s@wbb-law.com for future annual report notification)	
For fur	ther intermet	ion concerning this matter, pleas	•	1889 T
1 OI IUI	mer mormat		c cair.	
		lark W. Siler	at (414) 276-5800 Area Code & Daytime Telephone Number	
	Na	ame of Person	Area Code & Daytime Telephone Number	
Enclos	ed is a chec	k for the following amount:		,
] \$125.	00 Filing Fe	ce \$\int_\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Certified Copy Certificate of	Status &
			(additional copy is enclosed) Certified Copy (additional copy)	
		Mailing Address	Street/Courier Address	
		Registration Section Division of Corporations	Registration Section Division of Corporations	
		P.O. Box 6327	Clifton Building	
		Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
PrimeNet Direct Marketin		
(Must end with the words "Limited Liabili	ity Company," "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the pri	incipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
2100A Palmetto Street	2100A Palmetto Street	
Clearwater, FL 33765	Clearwater, FL 33765	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)		
The name and the Florida street address of the re	egistered agent are:	Ī
Mark J. K	Keefe SE = V	X**
Name	المنافع المناف	*,
2100A Palme	otto Street 9	MTC
Florida street address (P.O.	Box NOT acceptable)	
Clearwater, FL 33765	FL The state of th	
City, State, ar	nd Zip	

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)

(CONTINUED)

Page 1 of 2

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

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

days after the date of filing.) REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member.	Use attachment if necessary) LE V: Effective date, if other than the date of filing:	Title: "MGR" = Manager	Name and Address:	
ELE V: Effective date, if other than the date of filing: (OPTIONAL ffective date is listed, the date must be specific and cannot be more than five business days days after the date of filing.) REOUIRED SIGNATURE: Signature of a member of an authorized representative of a member.	LE V: Effective date, if other than the date of filing:		ber	
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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)