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(City/State/Zip/Phone #)

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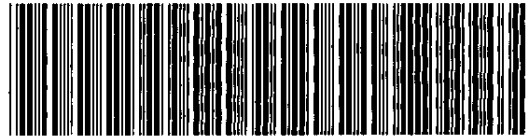
(Business Entity Name)

(Document Number)

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08/27/10--01017--022 **130.00

EFFECTIVE DATE
10/18/10

FILED
10 AUG 27 PM 2:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan AUG 30 2010

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TRANSACTION Paper Group, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LAURA DAVIS
(Name of Person)

LAURA DAVIS Acctg & Tax Svc LLC
(Firm/Company)

3623 E. Fort King Street
(Address)

Ocala, FL 34470-1318
(City/State and Zip Code)

For further information concerning this matter, please call:

LAURA DAVIS at (352) 624-1505
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy 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

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION
OF
TRANSACTION PAPER GROUP, LLC

FILED
10 AUG 27 PM 2:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Chapter 608, Florida Statutes, hereby make, acknowledge, and file the following Articles of Organization.

ARTICLE I - NAME

The name of this limited liability company shall be:
TRANSACTION PAPER GROUP, LLC

ARTICLE II - PRINCIPAL OFFICE

The principal place of business/mailing address is: 303 SE 17th Street, Suite 309, Ocala, Florida 34471.

ARTICLE III – DURATION

The Company effective date shall commence on October 18, 2010. The Company's existence shall be perpetual, unless the Company is earlier dissolved as provided in these Articles of Organization or the laws of the State of Florida.

ARTICLE IV – PURPOSE AND POWERS

The general purpose for which the Company is organized is to transact any lawful business for which a limited liability company may be organized under the laws of the State of Florida. The Company shall have all the powers granted to a limited liability company under the laws of the State of Florida.

ARTICLE V – REGISTERED AGENT

The name and address of the limited liability company's registered agent is:
David S Lavish, 303 SE 17th Street, Suite 309, Ocala, FL 34471

ACCEPTANCE

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 obligation of my position as registered agent as provided for in Chapter 608, Florida Statutes.



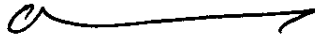
David S Lavish, Registered Agent

ARTICLE VI - MANAGAMENT

The Company shall be managed by a Manager in accordance with regulations adopted by the Members for the management of the business and affairs of the Company. These regulations may contain any provisions for the regulation and management of the affairs of the Company not inconsistent with law or these Articles of Organization. The Company shall initially have one (1) manager. The name and address of the initial Manager of the Company is:

David S Lavish Manager 303 SE 17th Street, Suite 309, Ocala, FL 34471

IN WITNESS WHEREOF, 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.


David S Lavish, Organizer

STATE OF FLORIDA
COUNTY OF MARION

BEFORE ME, a Notary Public, authorized to take acknowledgements in the state and county set forth above, personally appeared David S Lavish, known to me and known by me to be the person who executed the foregoing Articles of Organization and has acknowledged before me that he executed the same.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the state and county aforesaid, this 25th day of August, 2010.



LAURA L. DAVIS
NOTARY PUBLIC
STATE OF FLORIDA
Comm# DD960497
Expires 3/8/2014


Laura L. Davis

Notary Public, State of Florida

LAURA L. DAVIS

My Commission Expires: March 8, 2014

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10 AUG 27 PM 2:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA