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DATE:	02-08-2011
NAME:	LCP GLOBAL HOLDINGS, LLC
TYPE OF FI	LING: ARTICLES OF ORGANIZATION
COST:	\$125
RETURN:	
ACCOUNT	: FCA00000015
AUTHORIZ	ATION: ABBIE/PAUL HODGE Obbie Hook

### **COVER LETTER**

TO:	Registration S Division of Co			
SUBJI	ECT: LCP GI	LOBAL HOLDINGS, LLC		
5020.			cd Liability Company	
The en	closed Articles o	f Organization and fee(s) are	submitted for filing.	
Please	return all corresp	condence concerning this mat	ter to the following:	
	Jill M. Ormo	ond ·		
			Name of Person	
	Kaplin Stew	vart		
	Firm/Company			
	910 Harves	st Drive		
			Address	
	Blue Belli,	PA 19422		
			y/State and Zip Code	
	jormond@	)kaplaw.com		
		E-mail address: (to be used t	for future annual report notification)	
For fu	ther information	concerning this matter, please	e call:	
Jill N	M. Ormond		at ( 610 ) 941-2583	
	Name of Person Area Code & Daytime Telephone Number			
Enclo	sed is a check fo	or the following amount:		
<b>√</b> \$125.00	O Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy 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 FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is	<b>:</b>
LCP GLOBAL HOLDINGS, LLC	
(Must end with the words "Limited Liab	ility Company, "L.L.C" or "LLC.")
ARTICLE II - Address: The mailing address and street address of the p	principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
230 Everglade Avenue, Suite 102	c/o LCP Global Holdings, LLC
Palm Beach, FL 33480	c/o Kaplin Stewart (MBR)
	910 Harvest Drive, Blue Bell, PA 19422
business entity with an active Florida registration.)  The name and the Florida street address of the  James D. Mack	registered agent are:
Name	9
230 Everglade Av	renue, Suite 102
Florida street ac	idress (P.O. Box NOT acceptable)
Palm Beach	<sub>FL</sub> 33480
City, S	tate, and Zip
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of alterformance of my duties, and I am familiar with and istered agent as provided for in Chapter 608, F.S
(CONTIN	NUED)

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:

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing		
MGRM	James D. Mack 230 Everglade Avenue, S	uito 102
	Palm Beach, FL 33480	
(Use attachment if neo	seary)	
(Ose attachment it net	ssary)	
CLE V: Effective date,	other than the date of filing:	. (OPTIONAL)
effective date is listed, t	e date must be specific and cannot be mo	ore than five business days pri
00 days after the date of	iling.)	
DECLUDED SICNA	upe.	
REQUIRED SIGNA	URE:	
X		
	ure of thember or an authorized representat	day of a more han

(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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

## James D. Mack, Managing Member

Typed or printed name of signee

#### Filing Fees:

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

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