P. 01

Division of Corporations



Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

Account Number : 075350000353

Account Number Phone

: (212)431-5000

Fax Number

: (212)431-1441

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

2ma 4:3	Address:
	ACCIESSI

FLORIDA LIMITED LIABILITY CO. GRAPHIC COMMUNICATION GROUP USA LLC

CRETARY OF STATE LAHASSEE, FLORID

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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G. MCLEOD

Electronic Filing Menu

Corporate Filing Menu

JUL **2 0** 2011

EXAMINER

ARTICLES OF ORGANIZATION FOR ELOPIDA LIMPTED

		LADILLI I CO	ATENTA I	
ARTICLE I - Name: The name of the Limited Liability Comp	any is:	:		
GRAPHIC COMMUNICATION GROUP USA	LLC			
ARTICLE II - Address: The mailing address and street address or	f the principal office of the Lim	alted Liability Cor	mpany is:	
Principal Office Address:	Mailing Address:			
8437 LEGEND CLUB DRIVE	8437 LEGEND CLUB DRIVE			
WEST PALM BEACH FL. 33412	WEST PALM BEACH FL	33412	• •	
ARTICLE III - Registered Agent, Reg	istered Office, & Registered A	Agent's Signatur	<i>i</i> e:	
The name and the Florida street address	of the registered agent are:			
LAWRENCE RUDER	RMAN			
	Name	ASE	<u>'</u> = =	
04971 CACND ALTO	DIVE	□ □ □	- ;	

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..

City, State, and Zip

Florida street address (P.O. Box NOT acceptable)

Registered Agent's Signature

WEST PALM BEACH, FL 33412

(CONTINUED)

Page 1 of 2

Title

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

MGRM	LAWRENCE RUDERMAN 8437 LEGEND CLUB DRIVE		
	WEST PALM BEACH, FL. 33412		
	;		
······································			

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member,

(In accordance with section 608.408(3), Plorida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury. that the facts stated herein are true.)

LAWRENCE RUDERMAN, Organizer

Typed or printed name of signee

Filing Feesi

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

- 5 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)