TRANSMITTAL LETTER FOR FLORIDA LIMITED LIABILITY COMPANY

L98000000H93

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:

A DUANCED LASER PRINTER SERVICES L. C. (Proposed limited liability company name - must include suffix)

700002492227-- 3 -04/17/98--01058--003 ****293.75 ****293.75

Enclosed is an original and one (1) copy.

Filing fee for articles of organization of Florida Limited Liability Company:

\$250.00 Filing fee for Articles of Organization and Affidavit \$ 35.00 Designation of Registered Agent

A letter of acknowledgement will be issued free of charge upon filing. Please submit an additional \$8.75 if a certificate of status is needed. The fee for a certified copy \$552.50. Please send one check for the total amount made payable to the Florida.

Department of State.

FROM:

Thomas Kuleba Name (Printed or typed)

20328 HACIENDA CT.

4/31/08 Name Availability do Document DCC Examiner DCC Updater Updater DCC Verifyer DCC Acknowledgement DUC W. P. Verifyer

BOCA RATON FL. 33498
City, State & Zip

56/-883-5752 Daytime Telephone number

L98000000493

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ADVANCED LASER PRINTER SERVICES L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

7040 W. PALMETTO PARK RD, Suite 380 BOZA RATON FL. 33433

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

IN DEFINITE

ARTICLE IV - Management: (check and complete the appropriate statement)

The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is large to company is

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Thomas J. Kuleba JOANNE J. KULEBA
20328 HACIENDA CT.
BOCA RATON FL. 33498

BOCA RATON FL. 33498

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of	
ADVANCED LASER PRINTER SERVICES L. C. deposes and sa	ys:
	•
1) the above named limited liability company has at least two members	
1) the above named inniced hability company has at least two memoers	
2) the total amount of cash contributed by the member(s) is	\$ 5,000,00
3) if any, the agreed value of property other than cash contributed by member(s) is	<u> </u>
A description of the property is attached and made a part hereto. **	CAR ≥
4) the amount of cash or property anticipated to be contributed by member(s) is	\$ 35000.00
This total includes amounts from 2 and 3 above.	
* SEE ATTACHMENT L	S → =
	DA 2

Signature of a member or authorized representative of a member.

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

Attachment 1

Re: Advanced Laser Printer Specialists

Description of property

Desks, Tables, Cabinets, Telephones

Several Computers, copier, fax machine

Various Laser Printers

Tools

98 APR 17 AN II: 20
SEGRETARY OF STATE
TAIL ANA SSEE F. STATE

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:	
ADVANCED LASER PRINTER SER	ices L.C.
2. The name and address of the registered agent and office is: Thomas J. Kuleba (NAME) 20328 Hacieuda CT (P.O. Box NOT ACCEPTABLE) Boca Ratow FL. 3349	98 APR 17 AN II: 20 SECRETARY OF STATE TALLAHASSEE, FLORIDA
(CITY/STATE/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.

France Veleta 4/15/98
(SIGNATURE) (DATE)

Filing Fee: \$ 35 for Designation of Registered Agent