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SECRETARY OF STATE AS JIVISION OF CORPORATIONS

J. BRYAN

MAY 1 3 2008

EXAMINER

COVER LETTER

TO: Registration Section

Division of Corporations
SUBJECT: MIAMI DADE PRINTING COMPANY, LLC (Name of Limited Liability Company)
(Name of Limited Liability Company)
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the following:
ZARIK MEGERDICHIAN (Name of Person)
(Name of Person)
Hovee, /nc. (Firm/Company)
(Firm/Company)
(Firm/Company) STORY SAN TELLINOO ROAD (Address) (Address) (Address) (Address) (Address)
(Address) 공유다 유소
City/State and Zip Code)
For further information concerning this matter, please call:
\
Name of Person) at (818) 446-1170 X203 (Name of Person) (Area Code & Daytime Telephone Number)
MAILING ADDRESS: STREET ADDRESS:
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\sum{\$125.00 Filing Fee}\$ \$\sum{\$130.00 Filing Fee & \$\sum{\$155.00 Filing Fee & \$\sum{\$160.00 Filing Fee, Certificate}\$}\$ Certificate of Status \$\sum{\$Certified Copy}\$ of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. MIAM DASE PRINTING COMPANY LC. (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written
consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability
Company," "L.L.C.," "LLC.")
2. CAUTORNIA (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)
4. Pare 10, 2008 [Date of Organization] 5. Poroctual (Duration: Year limited liability company will cease to
exist or "perpetual")
6. (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 270-880 WEET 24TH STREET
HILLEAH, FL 33010 (Street Address of Principal Office)
(Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows:
ZARIK MECSENILLIALI
ZARIK MEGGEDICHIAN POAN
2900 SAN TERNAND KOAN
Grandera, CH GIADI
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in
the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a
translation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida:
PAPER PRODUCTS -) HANNEACTURING
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the ponalties of perjury that the facts stated herein are true.)
ZARIK MEGEZDICHIAN
Typed or printed name of signee

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 TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

If name unavailal	ole, the alternate name to be use	d in the state	of Florida is:		
2 T)	she Floride stores address of the		cont and office		
2. The name and	the Florida street address of the	. ~	_		
_	CINDA X	IM -	Kince	Louna	, LLP
-	(Name)	•		25.4
_	860 NE.	2 Ave	300		NOISIVE
	Florida Street Address (I	P.O. Box NOT	ACCEPTABLE)	<u>.</u>	<u> </u>
	MIAMI	FI.	33138		2 PH 4: 04
_					

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, Florida Statutes.

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

State of California

Secretary of State

CERTIFICATE OF GOOD STANDING CALIFORNIA LIMITED LIABILITY COMPANY

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

That on the **10th day of April, 2008, MIAMI DADE PRINTING COMPANY, LLC**, became recognized under the laws of the State of California by filing its Articles of Organization in this office; and

That according to the records of this office, the said limited liability company is authorized to exercise all its powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition of this limited liability company.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of April 10, 2008.



Jeha Bowen

DEBRA BOWEN Secretary of State SIVISION OF CORPORATIONS

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