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CORPORATION NAME	E(S) & DOCUMENT NUMBER(S), (if known):
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*** NEW FILINGS	AMENDMENTS
Profit	Amendment
NonProfit	Resignation of R.A., Officer/ Director
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	Merger 9 CATE
OTHER FILINGS	Change of Registered Agent Dissolution/Withdrawal Merger Name Availability QUALIFICATION Document OF REGISTRATION Document OGRAFITARY OF CORPORATION AVAILABILITY Document OGRAFITARY OF CORPORATION Document
Annual Report	Examiner
Fictitious Name	Limited Partnership Updater
Name Reservation	Reinstatement verifyer
	Trademark Approviedgement
	Other W. P. Verityer

CD2E031/1/95

Examiner's Initials

'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:

DISPLAY INDUSTRIES, LLC (Name of foreign limited liability company must end name at present.)	with the words "lim	ited company" or their abbreviation "L.C." i	f not so contained in the
GEORGIA (Jurisdiction under the law of which foreign limited liability company is organized)		. 58-2431847 (FEI number, if applic	able)
. 11/19/98 (Date of Organization)		DERPETUAL (Duration: Year limited liability company "perpetual")	will cease to exist or
		ctions 608.501, 608.502, and 817.155, F.S.)	•
2990 OLYMPIC INDUSTRIAL BL SMYRNA, GA 30080	VD.		
SHIRMLY GII 2000		t IMCDNG or manager IM	IGR1 who will
	each managing pany in Florida:	member [MGRM] or manager [M (attach additional page if necessar NAME & ADDRESS:	IGR] who will ry) TITLE:
List name, title, and business address of manage the foreign limited liability comp	pany in Florida:	(attach additional page il necessal	(3)
List name, title, and business address of manage the foreign limited liability comp	pany in Florida:	(attach additional page il necessal	TITLE:
List name, title, and business address of manage the foreign limited liability compounds. NAME & ADDRESS: MARK A HIGGINS	pany in Florida:	(attach additional page il necessal	TITLE:
. List name, title, and business address of manage the foreign limited liability compounds NAME & ADDRESS: MARK A HIGGINS 1015 PALMETTO DUNES DR	pany in Florida:	(attach additional page il necessal	TITLE: — — — — — — — — — — — — — — — — — — —

9. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of records in the state 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.)

Secretary of State

Corporations Division 315 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 DOCKET NUMBER : K90540011
CONTROL NUMBER : K842768
DATE INC/AUTH/FILED: 11/19/1998
JURISDICTION : GEORGIA
PRINT DATE : 02/23/1999

FORM NUMBER : 217

DISPLAY INDUSTRIES LLC ATTN: GREG CLEMENTS 2990 OLYMPIC INDUSTRIAL BLVD. SMYRNA GA 30080

CERTIFICATE OF EXISTENCE

l, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

DISPLAY INDUSTRIES, LLC A GEORGIA LIMITED LIABILITY COMPANY

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation, or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up, or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

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

1. The name of the Limited Liability Company is:	
DISPLAY INDUSTRIES, LLC	
2. The name and the Florida street address of the registered agent and office are:	
CORPORATION SERVICE COMPANY (Name)	
1201 HAYS STREET Florida street address (P.O. Box NOT ACCEPTABLE)	
TALLAHASSEE FL 32301 City/State/Zip	1 5 1

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.

(Signature)

Filing Fee: \$35 for Designation of Registered Agent

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of a member of DISPLAY INDUSTR	IES, LLC
certifies:	
1) the above named limited liability company has at least one member;	
2) the total amount of cash contributed by the member(s) is	\$ 200,000;
3) if any, the agreed value of property other than cash contributed by member(s) is (A description of the property is attached and made a part hereto.) and	\$;
4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is (This total includes amounts from 2 and 3 above.)	\$ 200,000.
Signature of a member or an 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.)	
MARK A. HIGGINS, MANAGING MEMBER Typed or printed name of signee	

Filing Fee: \$250.00 for Application and Affidavit