

L02000010116



ACCOUNT NO. : 072100000032

REFERENCE : 548307 7239635

AUTHORIZATION :

Patricia Pigato

COST LIMIT : \$ 125.00

ORDER DATE : April 24, 2002

ORDER TIME : 3:35 PM

ORDER NO. : 548307-001

CUSTOMER NO: 7239635

CUSTOMER: Ms. Stacey Porter
Ms. Stacey Porter

325 Meridian Avenue
#18
Miami Beach, FL 33139

RECEIVED
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DEPARTMENT OF STATE
DIVISION OF CORPORATE FILINGS
TALLAHASSEE, FL 32304

DOMESTIC FILING

NAME: MYSPOORTSPHOTO.COM, LLC

EFFECTIVE DATE:

900005361929-13

☐ ARTICLES OF INCORPORATION
☐ CERTIFICATE OF LIMITED PARTNERSHIP
☒ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

Document	CERTIFIED COPY
Examiner	DCC
Notar	DCC
Verifier	DCC
Acknowledgement	DCC
W. P. Verifier	DCC

CONTACT PERSON: Sara Lea - EXT. 1114

EXAMINER'S INITIALS:

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TALLAHASSEE, FL 32304

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MYSPOURSPHOTO.COM, LLC

ARTICLE II - Address:

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

325 MERIDIAN AVENUE, UNIT 18, MIAMI BEACH, FLORIDA 33139

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Corporation Service Company		
Name		
1201 Hays Street		
Florida street address (P.O. Box NOT acceptable)		
Tallahassee	FL	32301
City, State, and 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 as provided for in Chapter 608, F.S.

Corporation Service Company

By: Deborah D. Skipper

Registered Agent's Signature

Deborah D. Skipper
Asst. V. Pres.

Article IV - Management (Check box if applicable.)

- ☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Deborah D. Skipper
Signature of a member or an authorized representative of a member.

(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.)

DEBORAH D. SKIPPER

Typed or printed name of signer

Filing Fees:

\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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LIMITED POWER OF ATTORNEY


The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of MYSPORTSPHOTO.COM, LLC (the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

This Limited Power of Attorney is executed on this _____ day of _____, 2002.


Signature


Stacy Poole
Print Name of Signer

WITNESS:


Signature

SOPHIE ROBERT
Print Name of Witness

WITNESS:


Signature

CRAG AMBROSINI
Print Name of Witness

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TALLAHASSEE, FLORIDA

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MANAGERS OF
MYSPOORTSPHOTO.COM, LLC

STACEY PORTER
325 MERIDIAN AVENUE
MIAMI BEACH, FLORIDA 33139

HELEN PORTER
PO BOX 37
CRUZ BAY
ST. JOHN, USVI 00831

STEVEN SIMON
PO BOX 37
CRUZ BAY
ST. JOHN, USVI 00831

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