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To:

Division of Corporations

Fax Number

z (850)205-0383

From:

Account Name

: CORPORATE CLEARANCE CORP.

Account Number : 12000000011 Phone

: (718)888-7773

Fax Number

: (718)888-8559

# LIMITED LIABILITY COMPANY

BLR PHOTO, LLC

Certificate of Status	0
Certified Copy	1
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#### H040000193713

#### ARTICLES OF ORGANIZATION

FOR

#### FLORIDA LIMITED LIABILITY COMPANY

OF

#### BLR PHOTO, LLC

FIRST: The name of the Limited Liability Company is BLR PHOTO, LLC

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

### Barbara LoRe 3400 Northwest 44 Court, Ocala, FL 34482

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

## Barbara LoRe 3400 Northwest 44 Court, Ocala, FL 34482

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 statues 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.

Barbara LoRe, Registered agent

FOURTH: The Limited Liability Company is NOT a manager-managed company.

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.

Barbara LoRe, Member

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