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Office Use Only

J. BRWAN APR 1 2 2005

## TRANSMITTAL LETTER

Division of Corporations
SUBJECT: BADGER PHOTOGRAPHY LLC
(Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Julius W. Fornator (Name of Person)
BADGER Pholography LLC
(Firm/Company)
1264 Thornapple Dhile The Thing The Caddress)
1264 Thomapple Dhile  (Address)  Osprey FL. 34009  (City/State and Zip Code)
For further information concerning this matter, please call:
Tulius W Fowotor at (941) 966 0864  (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\Bigcup \text{\$130.00 Filing Fee & Certificate of Status}\$ \text{\$\subseteq \text{\$130.00 Filing Fee & Certified Copy (additional copy is enclosed)}} \Bigcup \$\subseteq \text{\$\subseteq \seteq \text{\$\subseteq \seteq \seteq \text{\$\subseteq \seteq \seteq \text{\$\subseteq \seteq \seteq \seteq \text{\$\subseteq \seteq \set
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
BADGER PHOTOGRAP	HY LLC
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1264 Thomapple Dr. Ospren, FL.	SAME
34729	
ARTICLE III - Registered Agent, Registered	F = 7 T
The name and the Florida street address of the re	egistered agent are:
Julius W. Fr	egistered agent are:
1264 Thoma Florida street add	omotor  op plc Dr. ress (P.O. Box NOT acceptable)
OSp rey City, State, as	FL 34009 nd Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	accept service of process for the above stated limited his certificate, I hereby accept the appointment as a. I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S

(CONTINUED)

Page 1 of 2

## ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: "MGR" = Manager "MGRM" = Managing Member MGR Tulius W. Fomotor 1264 Thornapple Dr. Osprey, Ft. 34009 (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. REQUIRED SIGNATURE:

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

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)