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(Requestor's Name)		
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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M. HODGES

05 July 53 Line 53

TRANSMITTAL LETTER

Division of	Section Corporations		
SUBJECT:	ARRANGING PIX	ŒLS LLC	
5656Ee1	(Name of Limited	Liability Company)	
The enclosed Articles	s of Organization and fee(s) are s	abmitted for filing.	
	espondence concerning this matte		
	KENNETH M	GRANGER	
**************************************		Name of Person)	···
	ARRANGING	PIXELS LLC	
	()	Firm/Company)	
	11310 S ORANGE BL	OSSOM TR 189	
		(Address)	
	ORLANDO.	. FL 32837	
		State and Zip Code)	·
For further informati	on concerning this matter, please	call:	
	H M GRANGER	at (407) 616-8034 (Area Code & Daytime To	
(N _E	ame of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check	k for the following amount:		
Ø \$125.00 Filing Fe	ee \$\square\$ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	REET ADDRESS:	MAILING A	
Registration Section Division of Corporations		Registration S Division of C	orporations
409 E. Gaines Street Tallahassee, Florida 32399		P.O. Box 632	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARRANGING PIXELS LLC	
ARTICLE II - Address: The mailing address and street addre	ess of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
11310 S ORANGE BLOSSOM TR 189 ORLANDO, FL 32837	
ARTICLE III - Registered Agent,	Registered Office, & Registered Agent's Signature:
The name and the Florida street addr	ress of the registered agent are:
4	KENNETH M GRANGER
•	
	Name
	Name 0 S ORANGE BLOSSOM TR 189
1131	
1131	0 S ORANGE BLOSSOM TR 189

tatutes relating to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature

(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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	KENNETH M GRANGER
	11310 S ORANGE BLOSSOM TR 189
	ORLANDO, FL 32837
	<u> </u>
•	
(Use attachment if necessary)	
NOTE: An additional article must b	e added if an effective date is requested.
REQUIRED SIGNATURE:	
H	
Signature of amember	or an authorized representative of a member.
(In accordance with sect of this document constitution that the facts stated he	ion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury rein are true.)
KENN	NETH M GRANGER

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

Page 2 of 2

Typed or printed name of signee