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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is: TTNW VISUAL COMMUNICATIO

Palm Beach Gardens, FL 33418

The mailing address and street address of the principal office of the Limited Liability Company is: 10b 1 Terrace

ARTICLE I - Name:

ARTICLE II - Address:

ARTICLE III - Registered Agent and Registered Office:

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

F	Philippe J.	enney	111
Floric	106 St 7 da street address (P.O. Box NO)	errace acceptable)	ED P. 2:
Palm B	Lach Gardons FL_City, State and Zip	33418	ORIDA ORIDA
Having been named as registered ag liability company at the place design registered agent and agree to act in statutes relating to the proper and co accept the obligations of my position	nated in this certificate, I this capacity. I further a complete performance of t	hereby accept the gree to comply with my duties, and I am	appointment as the provisions of all familiar with and
	Registered Agent's Signatu	Z	
(An additional	article must be added if an effec	etive date is requested)	
(In accordance w of this document	member or an authorized repre- vith section 608.408(3), Florida S i constitutes an affirmation under ted herein are true.)	Statutes, the execution	
P	HILIPPE JENNE Typed or printed name of sig	rnee	

CERTIFICATE OF DESIGNATION REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

First that TTNW VISUAL Communications, LLC
desiring to organize under the laws of the State of Florida
with its principal office, as indicated in the articles of incorporation has
named Philippe Jenney
named Philippe Jenney located at 106 1st Terrace
City of Palu Beach Garcounty of Palu Beach State of Florida,
as its agent to accept service of process within the state.

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION 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 Purity Registered Agent

Charter Number Only

VALIDATION

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Requestor's Fleyfie
Address
City State ZIP Phone

Marta -9 PH 2: 03

Empire Toll Free: 1-800-432-3028

CORPORATION(S) NAME

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TTNW	VISU	19	COM	munication
		LC.		
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() Profit				
() NonFrofit	()	Amendment		() Merger
() Foreign	()	Dissolution		() Mark
() Limited Partnership () Reinstatement		Annual Report Reservation		Other
Certified Copy		Photo Copies		() Certificate Under Seal
() Call When Ready (X) Walk In	() Will Wait	Call If Problem.	Pick Up	() After 4:30 () Mail Out
		·		
Name Availability				
Document				
Ereminer	·-			
Updater				
Verifier				
Acknowledgment				