

Florida Department of State
Division of Corporations
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To:

Division of Corporations
 Fax Number : (850) 205-0383

From:

Account Name : CORPORATION SERVICE COMPANY
 Account Number : 120000000195
 Phone : (850) 521-1000
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 DEPARTMENT OF STATE
 TALLAHASSEE, FLORIDA

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

PHELPSIMAGES.COM, L.L.C.

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|-----------------------|----------|
| Certificate of Status | 0 |
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DIVISION OF CORPORATION

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APR-25-2006 11:21A FROM: PHELPS MEDIA GROUP 5617533386

TO:16095300877

P.2/2

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

PhelpsImages.com, L.L.C.

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "L.L.C." or "L.C.")

ARTICLE II - Address:

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

Principal Office Address:13833 Wellington Trace
Unit E-4
Wellington, FL 33414**Mailing Address:**13833 Wellington Trace
Unit E-4
Wellington, FL 33414**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Mason Phelps, Jr.

Name

13833 Wellington Trace Unit E-4

Florida street address (P.O. Box NOT acceptable)

Wellington FL 33414

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.

Mason Phelps, Jr.

By:

Registered Agent's Signature (REQUIRED)

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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

MASON Phelps, Jr
MGRM**Name and Address:**13833 Wellington Trce
Unit E-40
Wellington FL 33414

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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 that the facts stated herein are true.)

By:

MASON Phelps JR.

Typed or printed name of signee

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)

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