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From:

Account Name : BROAD AND CASSEL (BOCA RATON)

Account Number: 076376001555

Phone : (561)483-7000

Fax Number

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

MILLER PHOTOGRAPHY, LLC

| Certificate of Status | 0 |
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DATE: September 26, 2006

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Please see attached Articles of Organization for filing. Thank you,

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DIVISION OF CORPORATION

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ARTICLES OF ORGANIZATION

OF

MILLER PHOTOGRAPHY, LLC

The undersigned does hereby subscribe to, acknowledge and file the following Articles of Organization for the purpose of creating a limited liability company under the laws of the State of Florida.

ARTICLE I

The name of this limited liability company shall be: MILLER PHOTOGRAPHY, LLC.

ARTICLE II

The mailing address and street address of the principal office of the limited liability company shall be 601 Congress Avenue, Suite 101A, Delray Beach, Florida 33445 with the privilege of having its offices and branch offices at other places within or without the State of Florida.

ARTICLE III

The initial registered office of this limited liability company is 601 Congress Avenue, Suite 101A, Delray Beach, Florida 33445. The initial registered agent at that address is Maja Sommerfeld.

ARTICLE IV

This limited liability company shall be a manager-managed company.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 25th day of September, 2006.

Fax Audit Number: 1106000237112 3

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Fax Audit Number: <u>H06000237112_3</u>

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 608.415, Florida Statutes, the limited liability company referenced below submits the following statement in designating the registered office/registered agent, in the State of Florida.

FIRST — The name of the limited liability company is MILLER PHOTOGRAPHY, L.I.C.

SECOND - The name and address of the registered agent and office is:

Maja Sommerfeld 601 Congress Avenue Suite 101A Delray Beach, Florida 33445

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.

Dated this 25th day of September, 2006,

Maja Sommerfeld

Fax Audit Number: 1106000237112 3

BOCHCORPSECURITYA.1

SECRETARY OF STATE DIVISION OF CORPORATIONS