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To:

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

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From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

photography by todd, llc

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This Instrument Prepared By:

JOHN P. MAAS, ESQUIRE
44 N.E. 16th Street
Homestead, Florida 33030

Florida Bar No. 435910

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ARTICLES OF ORGANIZATION
OF
PHOTOGRAPHY BY TODD, LLC

ARTICLE I:

The name of this limited liability company shall be: PHOTOGRAPHY BY TODD, LLC
a Florida limited liability company.

ARTICLE II:

The mailing address and street address of the principal office of the limited liability
company shall be as follows:

17485 SW 297 TERRACE
HOMESTEAD, FLORIDA 33030

ARTICLE III:

The name of the registered agent for PHOTOGRAPHY BY TODD, LLC is as follows:

TODD OELZE
17485 SW 297 TERRACE
HOMESTEAD, FLORIDA 33030

ARTICLE IV:

This limited liability company shall be a member-managed company and shall be
managed by one member manager.

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ARTICLE V:

The initial members of PHOTOGRAPHY BY TODD, LLC shall be:

TODD OELZE
17485 SW 297 TERRACE
HOMESTEAD, FL. 33030

DEBORAH OELZE
17485 SW 297 TERRACE
HOMESTEAD, FL. 33030

ARTICLE VI:

The initial managing member shall be:

TODD OELZE
17485 SW 297 TERRACE
HOMESTEAD, FLORIDA 33030

DATED this 4th day of October, 2006.


TODD OELZE

STATE OF FLORIDA)

COUNTY OF MIAMI-DADE)

BEFORE ME, the undersigned authority, personally appeared TODD OELZE, to me well known to be the person described in and who acknowledged before me, according to law that he made and subscribed the same for the purpose therein mentioned and set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal at Dade County, State of Florida, this 4th day of October, 2006.



Angiel Ore
My Commission 00240784
Expires August 13, 2007


NOTARY PUBLIC-STATE OF FLORIDA

My Commission Expires:

Print Name: Angiel Ore

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**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE
OF
PHOTOGRAPHY BY TODD**

HAVING BEEN NAMED AS REGISTERED AGENT TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF ORGANIZATION, 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 4th day of Oct., 2006.



TODD OELZE
Registered Agent
17485 SW 297 TERRACE
HOMESTEAD, FLORIDA 33030

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