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To:
Division of Corporations
Fax Number : (850)617-8383

From:
Account Name : A1A CORPORATE SERVICES, INC.
Account Number : 120010000247
Phone : (800)494-3124
Fax Number : (561)465-9885

FLORIDA/FOREIGN LIMITED LIABILITY

Sharon Morgenstern Photography LLC

Certificate of Status	0
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**ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED
LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

ARTICLE I: NAME

The name of the Limited Liability Company is:

SHARON MORGENSTERN PHOTOGRAPHY LLC

ARTICLE II: Address

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

20954 CIPRES WAY

BOCA RATON FLORIDA 33433

**ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE & REGISTERED
AGENT SIGNATURE**


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

SHARON J. MORGENSTERN

20954 CIPRES WAY

BOCA RATON FLORIDA 33433

Having been named as registered agent 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.

x 

SHARON J. MORGENSTERN / REGISTERED AGENT'S SIGNATURE

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SHARON MORGENSTERN PHOTOGRAPHY LLC

ARTICLE IV: MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.


ARTICLE V: MEMBERS (optional)

MANAGING MEMBER:

SHARON J. MORGENSTERN

20954 CIPRES WAY

BOCA RATON FLORIDA 33433

x 

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.)

SHARON J. MORGENSTERN

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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