

L07000127828

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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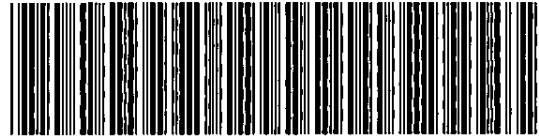
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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07 DEC 28 PM 2:45  
DIVISION OF STATE  
OPERATIONS  
TALLAHASSEE, FLORIDA

B. KOHR

DEC 31 2007

EXAMINER

FILED  
07 DEC 28 AM 8:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



CORPDIRECT AGENTS, INC. (formerly CCRS)  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301  
222-1173

FILING COVER SHEET  
ACCT. #FCA-14

CONTACT: KATIE WONSCH

DATE: 12/28/2007

REF. #: 000174.79114

CORP. NAME: IMGA SOCIAL NETWORKS LLC

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TALLAHASSEE, FLORIDA

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION   | <input type="checkbox"/> ARTICLES OF AMENDMENT  | <input type="checkbox"/> ARTICLES OF DISSOLUTION      |
| <input type="checkbox"/> ANNUAL REPORT               | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME              |
| <input type="checkbox"/> FOREIGN QUALIFICATION       | <input type="checkbox"/> LIMITED PARTNERSHIP    | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT               | <input type="checkbox"/> MERGER                 | <input type="checkbox"/> WITHDRAWAL                   |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION |   |   |
| <input type="checkbox"/> OTHER:                      |   |   |

STATE FEES PREPAID WITH CHECK# 524136 FOR \$ 155.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

\_\_\_\_\_ COST LIMIT: \$ \_\_\_\_\_

PLEASE RETURN:

- |  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS     |   |   |

Examiner's Initials



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TALLAHASSEE, FLORIDA

## ARTICLES OF ORGANIZATION

IMGA SOCIAL NETWORKS LLC,  
a Florida limited liability company

### ARTICLE I NAME

The business and affairs of the Limited Liability Company shall be conducted under the name of:

IMGA SOCIAL NETWORKS LLC

### ARTICLE II PRINCIPAL OFFICE

The street address and the mailing address of the principal place of business of the Limited Liability Company shall be:

5500 34th Street West  
Bradenton, Florida 34210

### ARTICLE III INITIAL REGISTERED AGENT/OFFICE

The registered office of the Limited Liability Company and its initial registered agent shall be:

Theodore J. Meekma  
5500 34th Street West  
Bradenton, Florida 34210

### ARTICLE IV MANAGEMENT AND POWERS

The business and affairs of the Limited Liability Company shall be managed by one or more Managers elected as provided in the Operating Agreement of the Limited Liability Company.



24<sup>th</sup> IN WITNESS WHEREOF, these Articles of Organization have been executed as of the  
day of July, 2007.

WITNESSES:

Linda H. Clem  
Print Name LINDA H. CLEM

Pisilla Kuehn  
Print Name Pisilla Kuehn

Linda H. Clem  
Print Name LINDA H. CLEM

Pisilla Kuehn  
Print Name Pisilla Kuehn

Barbara M. Hill  
Print Name BARBARA M. HILL

Daniel Miller  
Print Name DANIEL MILLER

Gregory C. Breunlich  
Gregory C. Breunlich

Theodore J. Meekma  
Theodore J. Meekma

Daniel Miller  
Daniel Miller

"MANAGERS"



**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 608.415 of the Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a registered office and registered agent in the State of Florida.

1. The name of the Limited Liability Company is:

IMGA SOCIAL NETWORKS LLC

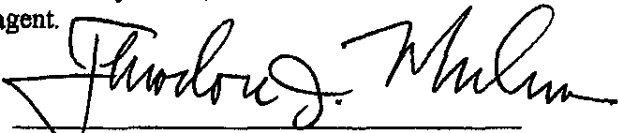
2. The name and the Florida street address of the registered agent are:

Theodore J. Meekma  
5500 34th Street West  
Bradenton, Florida 34210

Having been named 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Date: \_\_\_\_\_

7-24-07

  
\_\_\_\_\_  
Theodore J. Meekma

"REGISTERED AGENT"