

LOG000021748

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

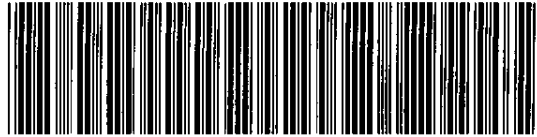
Special Instructions to Filing Officer:

S. HAWKES

MAR 5 2009

EXAMINER

Office Use Only



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03/04/09--01037--002 **155.00

FILED
09 MAR -4 PM 3:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT:
IMYOOR MEDIA, LLC.

The enclosed Articles of Organization and fee(s) are
submitted for filing.
Please return all correspondence concerning this matter to
the following:

Shaumond Scott
1105 Fort Clarke Blvd APT #512
Gainesville, FL 32606

For further information concerning this matter, please call:

Shaumond Scott at (239) 297-9342

Enclosed is a check for the following amount:
\$155.00 Filing Fee and Certified Copy

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314
(850) 245-6051

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY
COMPANY**

ARTICLE I - Name:

The name of the Corporation shall be IMYOOR MEDIA LLC.

ARTICLE II - Address:

The place in this state where the principal office of the Corporation is to be located is the City of Gainesville, Alachua County.

1105 Fort Clarke Blvd #512
Gainesville, FL 32606

The mailing address of this Limited Liability Corporation is:

1105 Fort Clarke Blvd #512
Gainesville, FL 32606

ARTICLE III - Purpose:

The business purpose for which this Limited Liability Company is organized includes any and all lawful business, including but not limited to, the following:

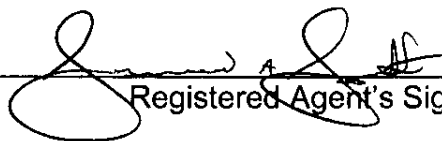
The Company shall engage in the business of creating and developing media with the purpose of preserving memories and providing professional quality media for consumers.

ARTICLE IV - Registered Agent:

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

Shaumond Scott
1105 Forte Clarke Blvd. #512
Gainesville, FL 32606

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.



Registered Agent's Signature

ARTICLE V- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager

"MGRM" = Managing Member

Title: MGMR

Shaumond Scott

1105 Forte Clarke Blvd. #512

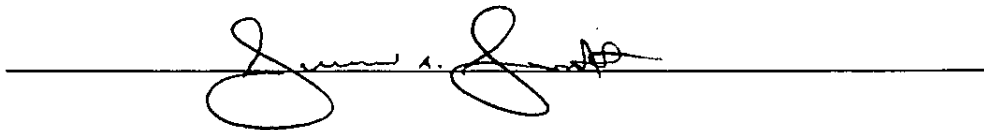
Gainesville, FL 32606

ARTICLE VI: The effective date for this Limited Liability Company shall be:

03/01/2009 – March 1, 2009

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.)



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA