

**L09000049682**

Florida Department of State  
Division of Corporations  
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To:  
Division of Corporations  
Fax Number : (850) 617-6383

From:  
Account Name : CSH SERVICES, LLC  
Account Number : 1200700000160  
Phone : (800) 494-3124  
Fax Number : (561) 455-9885

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**FLORIDA/FOREIGN LIMITED LIABILITY CO.****GRAND VISIONS PHOTOGRAPHY LLC**

|                       |          |
|-----------------------|----------|
| Certificate of Status | 0        |
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Help

H-09000126951-3

**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:

GRAND VISIONS PHOTOGRAPHY LLC

**ARTICLE II ADDRESS**

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

1002 RIDGEWOOD COVE S  
NICEVILLE, FLORIDA 32578**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE,  
REGISTERED AGENT SIGNATURE**

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

WILLIAM B JENKINS  
1002 RIDGEWOOD COVE S  
NICEVILLE, FLORIDA 32578SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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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.

  
WILLIAM B JENKINS / Registered Agent's signature

H-09000126951-3

4-09000126951-3

PAGE 2 GRAND VISIONS 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

WILLIAM B JENKINS

1002 RIDGEWOOD COVE S

NICEVILLE, FLORIDA 32578

MANAGING MEMBER

NARISSA N MASON

1002 RIDGEWOOD COVE S

NICEVILLE, FLORIDA 32578

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TALLAHASSEE, FLORIDA

.....

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.

WILLIAM B JENKINS

4-09000126951-3