(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	· · · · · · · · · · · · · · · · · · ·
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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G. MCLEOD

JUL - 7 2009

EXAMINER



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07/06/09--01033--023 **125.00

COVER LETTER

TO:

Registration Section

Division of	Corporations			
SUBJECT:	EJ MANTON	NPHOTOGRAPHY, LLC		
	Name of Limited Liability Company			
The enclosed Article	es of Organization and fee(s) are s	ubmitted for filing.		
Please return all corr	respondence concerning this matte	r to the following:		
		CKIE REINER		
	1	Name of Person		
		Firm/Company		
	3530 N	. 55TH AVENUE		
		Address		
		OD, FLORIDA 33021		
	REINERJA@AOL.COM	/State and Zip Code SMANTON@COMCAST.NET		
	E-mail address: (to be used for	r future annual report notification)		
For further informat	ion concerning this matter, please	call:		
		at (954) 806-8044		
Na	ame of Person	Area Code & Daytime Telephone Number		
Enclosed is a chec	k for the following amount:			
▼\$125.00 Filing Fe	ce \$\int_\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee. Certified Copy (additional copy is enclosed) \$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

	NPHOTOGRAPHY, LLC "Limited Liability Company," "L.L.C.," or "LLC.")		
ARTICLE II - Address:			
The mailing address and street add	ress of the principal office of the Limited Liabili	ity Compa	any i
Principal Office Address:	Mailing Address:	Mailing Address:	
3530 N 55TH AVENUE	Same		
	, Registered Office, & Registered Agent's Sig		
ARTICLE III - Registered Agen	as its own Registered Agent. You must designate an individual tion.) dress of the registered agent are:		DIVISION
ARTICLE III - Registered Agen (The Limited Liability Company cannot serve business entity with an active Florida registr	as its own Registered Agent. You must designate an individual tion.) Iress of the registered agent are: JACKIE REINER		OIVISIVIO
ARTICLE III - Registered Agen (The Limited Liability Company cannot serve business entity with an active Florida registr	as its own Registered Agent. You must designate an individual tion.) dress of the registered agent are:	or another 09 JUL -6	DIVISION OF
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ARTICLE III - Registered Agen (The Limited Liability Company cannot serve business entity with an active Florida registr. The name and the Florida street ad Florida street	as its own Registered Agent. You must designate an individual tion.) Iress of the registered agent are: JACKIE REINER Name 530 N 55TH AVENUE		DIVISION OF THE VIEW

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 (REQUIRED)

(CONTINUED)

Page 1 of 2

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

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

Title:	Name and Address:
"MGR" = Manager "MGRM" = Manag	
MGRM	JACKIE REINER
	3530 N 55TH AVENUE
	HOLLYWOOD, FL 33021
MGRM	ELSIE J. MANTON
	7595 CINEBAR DRIVE
	BOCA RATON, FL 33433
	
(Use attachment if	necessary)
ICLE V: Effective day offective date is listed 90 days after the date REQUIRED SIGN	9,
	Attelle haire
S	ignature 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 hat the facts stated herein are true.)
_	Jackie Reiner
Filing Fees:	Typed or printed name of signee
11111 1001	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)