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M. THOMAS

DEC 16 2009

EXAMINER

COVER LETTER

TO:

Registration Section

Division of Corporations		
SUBJECT: Treasured Images Photography, LLC		
(Name of Limited Liability Company)		
The enclosed Articles of Organization and fee(s) are submitted for filing		
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Bethie Erin Patrick		
(Name of Person)		
(Firm/Company)		
80 Raintree Dr. 물로 열		
(Address)		
Port Orange, Fl. 32127 (City/State and Zip Code) For further information concerning this matter, please call:		
(City/State and Zip Code)		
For further information consuming this way above all		
For further information concerning this matter, please call:		
Bethie Patrick at (386) 453-9283		
(Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \bigcup \\$155.00 Filing Fee & \bigcup \\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) 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 Tallahassee, FL 32301		

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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 27, 2008

BETHIE ERIN PATRICK 80 RAINTREE DR. PORT ORANGE, FL 32127

SUBJECT: TREASURED IMAGES PHOTOGRAPHY, LLC

Ref. Number: W08000049147

We have received your document for TREASURED IMAGES PHOTOGRAPHY, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on October 24, 2008. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas Regulatory Specialist II

Letter Number: 208A000551

2089 DEC 15 AM 11: 29

120 Jack Straken

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Con	npany is:
Treasured Images Photo	ography, LLC mited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	of the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
80 Raintree Dr.	80 Raintree Dr.
Port Orange, Fl 32127	Port Orange, FI 32127
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.)	70E = 1
The name and the Florida street addres	s of the registered agent are:
Rethie Frin I	Patrick : The first

80 Raintree Dr.

Florida street address (P.O. Box NOT acceptable)

Port Orange, Fl. 32-127
City, State, and Zip

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 (REQUIRED)

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

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

· <u>Title:</u> "MGR" ≈ Manager "MGRM" = Managing Member	Name and Address:
MGRM	Bethie Erin Patrick 80 Raintree Dr. Port Orange, Fl. 32127
	
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the date	ecific and cannot be more than five business days prior
REQUIRED SIGNATURE:	Patrick an authorized representative of a member.
	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.)

Bethie Erin Patrick

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)