## 1100000 29948

(Requestor's Name)	
(Address)	
(Address)	
,	
(City/State/Zip/Phone #)	
(Only/State/Zip/: Holle #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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Special Instructions to Filing Officer:	
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Office Use Only



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**EXAMINER** 



## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 5, 2010

CANDICE M. WILDS 2627N BERMUDA LAKE DR APT 104B BRANDON, FL 33510

SUBJECT: EYECHASE PHOTOGRAPHY L.L.C.

Ref. Number: W10000011282

We have received your document for EYECHASE PHOTOGRAPHY L.L.C. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

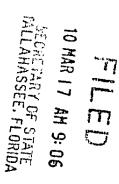
Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 310A00005480



## **COVER LETTER**

Division of Corporations			
SUBJECT: EyeChase Photography Name of Limited Liability Company			
The enclosed Articles of Organization and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Candice M. Wilds Name of Person			
Eye Chase Photography Firm/Company			
2627 Bernuda Lake Dr Apt 104B			
Brandon FL 33510 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Cardice NildS at 813 109-0232  Name of Person Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount:			
□\$125.00 Filing Fee Certificate of Status  □\$155.00 Filing Fee Certified Copy (additional copy is enclosed)  □\$160.00 Filing Fee, 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 P.O. Box 6327 Tallahassee, FL 32314  Street/Courier Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Tallahassee, FL 32301			

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The mailing address and street address of	f the principal office of the Limited Liability Company is:
ARTICLE II - Address:	
(Must end with the words "Limit	Liability Company, "L.L.C.," or "LLC.")
EveChase Photox	CYCLD LLC."  tood Liability Company, "L.L.C.," or "LLC.")

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

, i		
Principal Office Address:	Mailing Address:	
2627 Bernucka Lake Dr Apt 1048 Brandon FL 33510	21027 Bermuda lake Dr Apt 104B Brandon FL 33510	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)		
The name and the Florida street address of the re		

Coundice Wilds

Name

2621 Bermuda Lake Dr Apt 104 BESS STATE

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

Brandon

FL 3.3510

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)

(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" = Managing Member (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** 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.)

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

\$ 5.00 Certificate of Status (Optional)

Filing Fees: