

L100000 61847

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

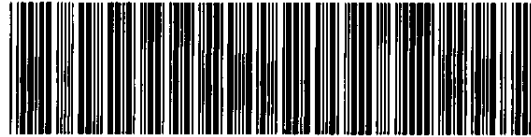
Special Instructions to Filing Officer:

A. LUNT

JUN - 9 2010

EXAMINER

Office Use Only



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06/07/10--01024--013 **125.00

FILED
2010 JUN - 7 PM 2: 27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Infinity Photography by Rita, L.L.C

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:

Rita Backus

Name of Person

Infinity Photography by Rita, L.L.C

Firm/Company

1619 Stipule Court

Address

Trinity, FL 34655

City/State and Zip Code

infinityphotographybyrita@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rita Backus

Name of Person

at (727) 644-9253

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 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

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Infinity Photography by Rita, L.L.C.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

1619 Stipule Court

Trinity, FL 34655

Mailing Address:

1619 Stipule Court

Trinity, FL 34655

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Rita Backus

Name

1619 Stipule Court

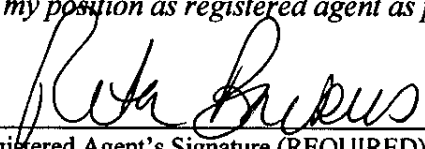
Florida street address (P.O. Box **NOT** acceptable)

Trinity, FL 34655

FL

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)

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2010 JUN -7 PM 2:27
CLERK OF COURT
HALL COUNTY, FLORIDA

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

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FBI NEW YORK
FBI NEW YORK

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Rita Backus

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