L10000109875

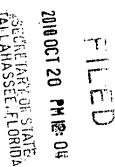
(Requ	iestor's Name)	
(Addr	ess)	
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(City/:	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL MAIL
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Certified Copies	Certificates	s of Status
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C. LEWIS OCT 2 1 2010 EXAMINER

COVER LETTER

TO:	Registratio Division of	n Section Corporations	•	*
A SUBJ	ECT: Florid	a Center of Photography	LLC	·
			ed Liability Company	
The en	nclosed Article	s of Organization and fee(s) are	submitted for filing.	
Please	return all corr	espondence concerning this matt	er to the following:	. ,
	David Tag	gart	Name of Person	
	Florida Ce	enter of Photography		
			Firm/Company	
	1100 Bisc	ayne Blvd.		
			Address	
•	Miami, FL			
		Cit	y/State and Zip Code	
	dtaggart@	floridacenterofphotograp	hy.com for future annual report notification)	
		E-man address. (to be used)	or ruttre annuar report notification)	
For fu	rther informati	on concerning this matter, please	e call:	
David	d Taggart		at (305) 812-8728	
	Na	me of Person	Area Code & Daytime Tel	ephone Number
Enclo	sed is a checl	k for the following amount:		
\$125.0	0 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 Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Compa	ny is:	
Florida Center of Photography, LLC.		
	d Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Li	ability Company is:
Principal Office Address:	Mailing Address:	
100 Biscayne Blvd.	1100 Biscayne Blvd.	
flami, FL 33132	Miami, FL 33132	
1100 Biscayne Blvd.	Name	TALLAMASSEE FLORIDA
	eet address (P.O. Box <u>NOT</u> acceptable)	LOF C
Miami	FL33132	
Having been named as registered agent and liability company at the place designate registered agent and agree to act in this cap statutes relating to the proper and comple accept the obligations of my position as	ed in this certificate, I hereby accept the pacity. I further agree to comply with ete performance of my duties, and I am	e appointment as the provisions of all n familiar with and

(CONTINUED)

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	2010 OCT 20 PM SECRETARY OF TALLAHASSEE. F
David Taggart, MGR	1100 Biscayne Blvd. Miami, FL 33132	
4400, d. 4700		
(Use attachment if necessary)		
LE V: Effective date, if other than the	e date of filing: October 18, 2010 be specific and cannot be more than fi	(OPTIONAL) ive business davs n

REQUIRED SIGNATURE:

Signature of pmember 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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

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)