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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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B. BOSTICK
DEC 1 3 2011
EXAMINER

# **COVER LETTER**

TO:

**Registration Section** 

Division of C	orporations					
Amv	Van Epps Photog	ıraphy	*** ,			
SUBJECT: 74119		led Liability Compa	any		<del></del>	
* *						
The enclosed Articles	of Organization and fee(s) are	submitted for filing	ġ.			
Please return all corres	pondence concerning this mat	ter to the following	<b>;</b> :			
Amy F N	Van Epps					
7 Will <b>y 12</b> .	у ин Ерро	Name of Person				
		Firm/Company				
16202 S	tonebrook Drive	Address	<del> </del>			
		Address				
Sanford, F	· · · · · · · · · · · · · · · · · · ·			E	<u> </u>	
		ty/State and Zip Code	<b>:</b>	<u> </u>	1 DEC	ing-su-
amy@amy	vanepps.com E-mail address: (to be used	for future annual repo	net notification)	<u> </u>	* * **********************************	**********
For further information	concerning this matter, pleas	·	,		r ,∵ r∞ :	· crips :
roi tutulei informatioi	concerning this matter, pieas	c can.		<u></u>	- <u> </u>	i li ∰ Cancas i Cancas i
Amy E. Van Epp	os	at (407	760-4715	22 E		
Name	e of Person	Area Code	e & Daytime Tele	phone Number 🗠		
Enclosed is a check t	or the following amount:					
\$125.00 Filing Fee [	_	\$155.00 Filir Certified Co (additional copy	ру	\$160.00 Filing Certificate of Certified Copy (additional copy	Status &	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division Clifton B 2661 Exe	ourier Address ion Section of Corporations building ecutive Center Cosee, FL 32301			

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

.")

ted Liability Company is:

The name of the Limited Liability Company is:
Amy Van Epps Photography LLC
(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 Limit

ARTICLE I - Name:

Principal Office Address:	Mailing Address:
16202 Stonebrook Drive	16202 Stonebrook Dr.
Sanford, FL 32773	Sanford, FL 32773

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:

Amy E. Van Epps

Name

16202 Stonebrook Drive

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

Sanford.

Name

16202 Stonebrook Drive

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 (REQUIRE

(CONTINUED)

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

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

MGRM	Amy E. Van Epps	
	16202 Stonebrook Dr.	
	Sanford, FL 32773	
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(Use attachment if necessa	y)	
LE V: Effective date, if oth	er than the date of filing: (0	OPTIONA
	te must be specific and cannot be more than five bu	siness day
days after the date of filin	.)	

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. 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.)

Amy E. Van Epps

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)