L12000158176

| (Re | questor's Name) | | |
|-------------------------|-------------------|-------------|--|
| (Address) | | | |
| (Ad | dress) | | |
| (Cit | ry/State/Zip/Phon | e #) | |
| PICK-UP | ☐ WAIT | MAIL | |
| (Bu | siness Entity Nar | me) | |
| (Document Number) | | | |
| Certified Copies | _ Certificates | s of Status | |
| Special Instructions to | Filing Officer: | | |
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Office Use Only



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SECRETARY OF STATE TALL AHASSEE, FLORIDA

APPROVED AND FILED

D. BRUCE

DEC 19 2012

EXAMINER

EFFECTIVE DATE 01/01/13

COVER LETTER

| TO: Registration Section Division of Corporation | s | | | | | |
|--|---------------------------------|--------------------------------------|---------------|------------------------------|--------------------|----------|
| _{suвјест:} Image FX | Media L | LC | | | | |
| SUBSECT. | | ed Liability Company | | | | |
| The enclosed Articles of Organizat | tion and fee(s) are s | submitted for filing. | | | | |
| Please return all correspondence of | oncerning this matte | er to the following: | | | | |
| Cesar Aybaı | ^ | | | | | |
| | | Name of Person | | | | |
| | | | | | | |
| | | Firm/Company | | | | |
| 7824 Shalim | ar St. | | | | TATE SE | 12 |
| · · · · · · · · · · · · · · · · · · · | | Address | | | TAT ERE | 12 DEC |
| Miramar FL | 33023 | | | | IASS | 8 |
| | - | y/State and Zip Code | <u> </u> | | Eg | = |
| caybar@imagef | | | | | 필승 | |
| | ` | or future annual report i | notification) | | | 16 |
| For further information concerning | this matter, please | call: | | | a de la composição | |
| Cesar Aybar | | _at (954) | 26199 | 58 | | |
| Name of Person | | Area Code & | Daytime Telep | ohone Number | | |
| Enclosed is a check for the following | owing amount: | | | | | |
| | 00 Filing Fee & icate of Status | □\$155.00 Filing I Certified Copy | | \$160.00 File Certificate | _ | |

Mailing Address

Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

(additional copy is enclosed)

Street/Courier Address
Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Certified Copy

(additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| The name of the l | Limited Liability Compa | any is: | | | |
|--|--|---|--|--------------------------|-------------------|
| Image FX Media LLC | | | | | |
| | | ed Liability Company, "L.L.C.," or "LLC.") | | | |
| ARTICLE II - A | ddress: | | | | |
| | | the principal office of the Limited Liab | oility Com | ıpany | is: |
| Principal Office | Address: | Mailing Address: | | | |
| 7824 Shalimar St. Mi | ramar FL 33023 | | | | |
| | | | | | |
| (The Limited Liability | | istered Office, & Registered Agent's S on Registered Agent. You must designate an individu | | | |
| The name and the | Florida street address of | of the registered agent are: | YHV7 | 03EC | |
| | Cesar Aybar | N | ARY SSE | 8 | |
| | | Name . | ्रा स | 翌 | |
| | 7824 Shalimar St | | ELORIDA FLORIDA | | |
| | Florida st | treet address (P.O. Box NOT acceptable) | Z S | 9 | |
| | Miramar fl 33023 | FL | Dr.≽- | | |
| | | City, State, and Zip | | | |
| liability comp registered agen all statutes relo | any at the place designa t and agree to act in this sting to the propey and c | and to accept service of process for the acted in this certificate, I hereby accept the capacity. I further agree to comply with omplete performance of my duties, and I near-registered agent as provided for in | e appointn h the prov I am famil | nent d ision iar w | as s of ith |
| | The grant of the g | · | | | |

Page 1 of 2

(CONTINUED)

EFFECTIVE DATE 01/01/13

ARTICLE I - Name:

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: |
|--|--|
| MGR | Cesar Aybar |
| | 7824 Shalimar St. |
| | Miramar FI 33023 |
| | |
| | |
| | |
| | |
| | A CONTRACTOR OF THE CONTRACTOR |
| | |
| | |
| (Use attachment if necessary) | \mathcal{L}_{1} |
| ARTICLE V: Effective date, if other than the date (If an effective date is listed, the date must be prior to or 90 days after the date of filing.) | e of filing: 101 /ST 2013 (OPTIONAL) specific and cannot be more than five business days |
| REQUIRED SIGNATURE: | |
| 1 Office | THUILIT ES TO |
| Signature of a member or | an authorized representative of a member. |
| constitutes an affirmation under the | 3) Flortia Statutes, the execution of this document of the condition of th |
| constitutes a third degree felony as p | i submitted in a document to the Department of State. |
| Cesar Aybar | |
| Typed o | vr 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)