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JAN 1 6 2013 T. HAMPTON (850) 245-6051.

COVER LETTER

TO:	Registration S Division of Co			
SURJE	CT:	Long Le Mame of Limite	ens Cameva, ed Liability Company	LLC
The end	closed Articles o	f Organization and fee(s) are s	ubmitted for filing.	
Please r	eturn all corresp	ondence concerning this matte	er to the following:	
-		Eric	Randolph	
		f	ens Camera Firm/Company	,LLC
			Florse Str	
			Address OFL 35 WState and Zip Code	
-		City Pic+ii 1 E-mail address: (to be used f	Vistate and Zip Code (a Ne+Zevo. or hubure annual report notification)	Net
For fur	her information	concerning this matter, please		
			at (<u>407</u>) <u>493</u> Area Code & Daytime Telep	6560 Ohone Number
Enclos	ed is a check f	or the following amount:		
2 \$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	Street/Courier Address Registration Section Division of Corporations	

Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
(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: Mailing Address:
3616 Eloise Street 3616 Eloise Street Orlando, FL 32806 32806
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:
Dan Bennett
Traille
1605 Dove Drive Florida street address (P O. Box NOT acceptable)
Orlands FL 32806 City, State, and Zip
Having been named as registered agent and to accept service of process for the above stated limite 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.
1 B 1
Registered Agent's Signature (REQUIRED)
(CONTINUED)

Page 1 of 2

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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	Name and Address:
"MGRM" = Managing Member MGR	Eric Randolph, 3616 Eloise Street Orlando, FL 32806
(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 prior to or 90 days after the date of filing.)	be specific and cannot be more than five business days
REQUIRED SIGNATURE: Signature of a member	cor an authorized representative of a member.
constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, an on submitted in a document to the Department of State as provided for in s.817.155, F.S.)
Edin o Foot	C Randolph Ded or printed name of signee 3 AN

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)