## \*L13000137213

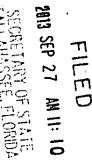
	$\langle \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \!$
	(Requestor's Name)
<u> </u>	(Address)
<del></del>	(Address)
	(City/State/Zip/Phone #)
PICK-L	UP WAIT MAIL
	(Business Entity Name)
-	(Document Number)
Certified Copies	Certificates of Status
Special Instruction	ns to Filing Officer:





500252092355

09/27/13--01021--006 \*\*125.00



(850) 245-6051.

## **COVER LETTER**

COVEREETIER
TO: Registration Section Division of Corporations
SUBJECT: Photo Bomb, LLC
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:
Michael Miglio
Name of Person
Photo Bomb, LLC
Firm/Company
15210 Amberly Drive, Apt 1416
Address
Tampa, FL, 33647
City/State and Zip Code
mmiglio@mail.usf.edu  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Michael Miglio at 813 415-4481
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
■\$125.00 Filing Fee   Certificate of Status  Certificate of Status & Certificate

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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY **ARTICLE I - Name:** The name of the Limited Liability Company is: Photo Bomb, 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 Limited Liability Company is: **Mailing Address: Principal Office Address:** 15210 Amberly Drive, Apt 1416 15210 Amberly Drive, Apt 1416 Tampa, FL 33647 Tampa, FL 33647 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: Romel Pancho Name 14436 Reuter Strasse Circle, Apt 3 Florida street address (P.O. Box NOT acceptable)

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..

City, State, and Zip

Registered Agent's Signature (REQUIRED)

Tampa, FL 33613

(CONTINUED)

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

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

	Title:	Name and Address:	
	"MGR" = Manager		
	"MGRM" = Managing Member		
	MGRM	Michael Miglio	
		15210 Amberly Drive, Apt 1416	
		Tampa, Florida 33647	
	MGRM	Romel Pancho	
		14436 Reuter Strass Circle, Apt 3	
		Tampa, Florida 33613	
	MGRM	Patrick Canezo	
		1109 Sweet Breeze Drive	
		Valrico, Florida 33594	
		****	
		1	
	(Use attachment if necessary)		
ART	FICLE V: Effective date, if other than the	e date of filing: (OPTIONAL)	
		t be specific and cannot be more than five business days	
prio	r to or 90 days after the date of filing.)	TALL STATE	
		上門 SEP	T
	REQUIRED SIGNATURE:	7	FILED
			T
	Signature of a memb	er or an apthorized representative of a member.  8 408(3) Florida Statutes, the execution of this document	
	ľ	8.408(3), Florida Statutes, the execution of this document	, b
	constitutes an affirmation unde	r the penalties of perjury that the facts stated herein are true.	
	I am aware that any false infor	mation submitted in a document to the Department of State	
		y as provided for in s.817.155, F.S.)	
	PATRICIO	CANEZO	
	$T_{i}$	yped 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)