L15000017552

(R€	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	-
	ty/State/Zip/Phone	40
(CI	ty/State/Zip/Phone	· #/)
. PICK-UP	WAIT	MAIL .
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	-
ı		
	: Office Use Onl	v .



700268270907

01/15/15--01019--011 **130.00

15 JAN 15 PH 4: 18

JAN 2 9 2015

T. HAMPTON

COVER LETTER

Division of	Corporations		
SUBJECT: <u>Cent'a</u>	nni Photography, LLC Name of Lir	mited Liability Company	
The enclosed Articles	of Organization and fee(s) a	re submitted for filing.	
Please return all corre	espondence concerning this m	natter to the following:	
<u>Jessica</u>	Quinones	Name of Person	
		Name of Ferson	
Cent'anı	ni Photography, LLC		
		Firm/Company	
3030 N	Rocky Point Drive W, #150		
		Address	
Tampa,	Florida 33607		
	C	City/State and Zip Code	
info@centanni	photography.com E-mail address: (to be use	d for future annual report notific	ation)
For further information	on concerning this matter, ple		
Jessica Quinones Nar	ne of Person at (_	727) 422-9125 Area Code Daytime Te	lephone Number
Enclosed is a check for	or the following amount:		
□ \$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)
Ma	iling Address	Street/Courier Add	race

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:		
Cent'anni Photography, LLC (Must end with the words "Limit	ed Liability Company, "L.L.C.," o	 or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal		
Principal Office Address:	Mailing Address:	
3030 N Rocky Point Drive W, #150 Tampa, Florida 33607	3030 N Rocky Point Drive Tampa, Florida 33607	e W, #150
ARTICLE III - Registered Agent, Registered Offic (The Limited Liability Company cannot serve as its own another business entity with an active Florida registration	vn Registered Agent. You must de	
The name and the Florida street address of the register	red agent are:	
<u>Jessica Quinones</u> Nar	ne	
3030 N Rocky Point Drive V Florida street address (P.O. B		
<u>Tampa</u>	FL 33607	
City	Zip	
Having been named as registered agent and to accept the place designated in this certificate, I hereby acc capacity. I further agree to comply with the provision of my duties, and I am familiar with and accept the Cha	ept the appointment as registered on the of all statutes relating to the pro	agent and agree to act in this per and complete performance
Registered Agent's Sig	nature (REQUIRED)	-
(CONTIN	(UED)	SEC J
Page 1 c	ศ2	JAN 15 PN 4: 18 SALARY OF STATE ANALYSISEE, FLORIDA

<u> Title:</u>	Name and Address:
"AMBR" = Authorized Member	
'MGR" = Manager	Jacobs Outsoner
<u>President</u>	<u>Jessica Quinones</u> 3030 N Rocky Point Drive W, #150
	Tampa, Florida 33607
	
	
EV: Effective date, if other than the date ctive date is listed, the date must be sp f filing.)	e of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or 90
EV: Effective date, if other than the date ctive date is listed, the date must be sp f filing.)	pecific and cannot be more than five business days prior to or 90
E V: Effective date, if other than the date ctive date is listed, the date must be sp f filing.) E VI: Other provisions, if any.	pecific and cannot be more than five business days prior to or 90
ctive date is listed, the date must be sp f filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE:	ecific and cannot be more than five business days prior to or 90
EV: Effective date, if other than the date ctive date is listed, the date must be sp f filing.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation under I am aware that any false infor	pecific and cannot be more than five business days prior to or 90
EV: Effective date, if other than the date ctive date is listed, the date must be sp f filing.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation under I am aware that any false infor	ember or an authorized representative of a member. 25.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true. 25.0203 (1) (b) and the document to the Department of State and as provided for in s.817.155, F.S.)
EV: Effective date, if other than the date ctive date is listed, the date must be sp f filing.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation under I am aware that any false infor constitutes a third degree felor	ember or an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true. mation submitted in a document to the Department of State my as provided for in s.817.155, F.S.) es Typed or printed name of signee
EV: Effective date, if other than the date entire date is listed, the date must be sp filling.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation under I am aware that any false infor constitutes a third degree felor	ember or an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true. rmation submitted in a document to the Department of State my as provided for in s.817.155, F.S.) es Typed or printed name of signee
EV: Effective date, if other than the date entire date is listed, the date must be sp filling.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation under I am aware that any false infor constitutes a third degree felor Jessica Quinon	ember or an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true. rmation submitted in a document to the Department of State my as provided for in s.817.155, F.S.) es Typed or printed name of signee
EV: Effective date, if other than the date entire date is listed, the date must be sp filling.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a management of a managemen	ember or an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true. rmation submitted in a document to the Department of State my as provided for in s.817.155, F.S.) es Typed or printed name of signee
EV: Effective date, if other than the date entire date is listed, the date must be sp filling.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation under I am aware that any false infor constitutes a third degree felor Jessica Quinon	ember or an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true. mation submitted in a document to the Department of State my as provided for in s.817.155, F.S.) ES Typed or printed name of signee Filing Fees: ganization and Designation of Registered Agent
EV: Effective date, if other than the date entire date is listed, the date must be sp filling.) EVI: Other provisions, if any. EVI: Other provisions, if any. Signature of a me (In accordance with section 60 constitutes an affirmation under I am aware that any false infor constitutes a third degree felor Jessica Quinon \$125.00 Filing Fee for Articles of Or \$30.00 Certified Copy (Optional)	ember or an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true. mation submitted in a document to the Department of State my as provided for in s.817.155, F.S.) ES Typed or printed name of signee Filing Fees: ganization and Designation of Registered Agent