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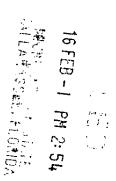
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FEB 12 2016; S. GILBERT

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: HOWY HICKS PHOTOGRAPHY, 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:
HOWY HICKS
Name of Person
Firm/Company
917 WATERSIDE LN. #203
Address
CELEBRATION, FL 34747
City/State and Zip Code
HOLLYBROOKE HICKS@GMAIL. COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
1401 XI 4666 Alall 160 - 21.21
How the Marca Code Daytime Telephone Number
The College Co
Enclosed is a check for the following amount:
\$125.00 Filing Fee S130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing Address Street Address
New Filing Section New Filing Section Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY 16 FEB-1 PM 2:54 ARTICLE I - Name: The name of the Limited Liability Company is: HOW HICKS PHOTOGRAPHY, UC (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: HOLLY HICKS 917 WATERSIDE LN. #203 CELEBRATION, FL 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: How Hicks 917 WATERSIDE LN. #203 Florida street address (P.O. Box NOT acceptable) City State 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 605, F.S.. istered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Citle:</u>	Name and Address:
AMBR" = Authorized Member MGR" = Manager	
AMBR	HOWY HICKS
	917 WATERSIDE LN. #203 CELEBRATION, FL 34747
	CRACKA 11947, FC 34147
	
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