

L16000033347

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

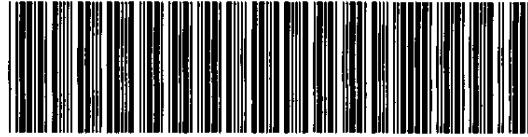
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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16 FEB -8 PM 12:21  
TALLAHASSEE, FLORIDA

FEB 1 3 2016

S. GILBERT

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Skyview Photography Services, 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:

Donovan Perry

Name of Person

Skyview Photography Services, LLC

Firm/Company

10098 Gulf Blvd

Address

Treasure Island, FL 33706

City/State and Zip Code

DonovanJamesPerry@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Donovan Perry

727

637-7746

at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for 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)

**Mailing Address**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

New Filing 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:

Skyview Photography Services, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

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STATE OF FLORIDA

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

10098 Gulf Blvd

Treasure Island, FL 33706

Mailing Address:

10098 Gulf Blvd

Treasure Island, FL 33706

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:

Richard T. Perry

Name

10098 Gulf Blvd

Florida street address (P.O. Box **NOT** acceptable)

Treasure Island

FL

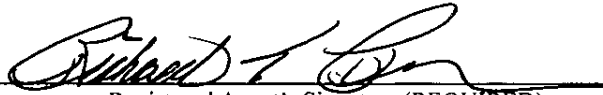
33706

City

State

Zip

*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.*



Registered Agent's Signature (REQUIRED)

(CONTINUED)

The name and address of each person authorized to manage and control the Limited Liability Company:

**MGR**

Treasure Island, FL 33706

Seminole, FL 33778

Cody Conti 50%

SIGNATURE: Donovan Perry

Typed or printed name of signee

**\$ 5.00 Certificate of Status (Optional)**