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(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
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COVER LETTER

	ew Filing Section ivision of Corpora	tions		
SUBJECT	. BRODIE	HARVET	PHOTOGRAPHY	LLC
DODGEO!	·	Name of	Limited Liability Company	
The enclose	ed Articles of Orga	nization and fee(s)	are submitted for filing.	
Please retu	m all corresponder	ice concerning this	matter to the following:	
	BRODIE	HARVEY		
			Name of Person	
	BRODIE	HARVEY	PHOTOGRAPHY	
			Firm/Company	· · · · · · · · · · · · · · · · · · ·
	5301 Gu	LF BLVD	, APP. F610	
			Address	
,			FL: 33706	
prodia	2 brodie har			rodioharvey@gmail.com
		·	sed for future annual report not	ification)
For further ii	nformation concerr			
	BRODIE H	IARUEY at	(1537
	Name of I	Person	Area Code Daytime Tele	ephone Number
126	a check for the fol	lowing amount:		
25.00 Fi		30.00 Filing Fee & ertificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclos	\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Ad		Street Address	
	New Filing: Division of P.O. Box 63	Corporations	New Filing Secti Division of Con Clifton Building	porations

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ERODIE	HARVEY	PHOTOGRAPI	HH	الله الله		
(Must co	ntain the words "Lim	nited Liability Company, "	L.L.C.,	" or "LLC.")	
E II - Address: ag address and street	address of the princi	pal office of the Limited I	Liability	/ Company i	s:	
<u>Princi</u>	ipal Office Address	:		Mailing A	\ddress:	
<i>-</i> -	F BLUD, AL		5301	_	BLVD,	

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:

ARTICLE I - Name:

The name of the Limited Liability Company is:

BRODIE	HARVEY			
	Name			
5301 GUIF!	BLVD, APP F610			
Florida street address (P.O. Box NOT acceptable)				
ST PETE BEAC	H FL 33704	<u> </u>		
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..

(CONTINUED)



	Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
\ <u>`</u>	MGR "	BRODIE HARVEY.
	BRODIE HARVEY	5301 GULF BLVD, F61D ST PETE BEACH, FL 33706
	(Use attachment if necessary)	
(If an eff the date <u>Note:</u> I the docu	of filing.)	and cannot be more than five business days prior to or 90 days after the applicable statutory filing requirements, this date will not be listed a
	REQUIRED SIGNATURE:	
	This document is executed in I am aware that any false info	r or an anniorized representative of a member. n accordance with section 605.0203 (1) (b), Florida Statutes, remation submitted in a document to the Department of State only as provided for in s.817.155, F.S.
	BRODIE Tyl	HARVEM. ped 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)

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

ARTICLE IV-