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(Red	questor's Name)	
(Add	dress)	
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(Cit	y/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)	
(Do	cument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Laura Bogan 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:
Laura Bogan Name of Person
Laure Bugan Photography LCC Firm/Company
2011 Orake Rd Address
^
Pensacola F1 32503
Laurabogan OME, com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Laura Bogan au 850, 380 344/
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 Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Street Address
New Filing Section New Filing Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Lowra Bogan Photography LLC (Must contain the words Limited Liability Company. L.L.C., or "BLC.")	
(Must contain the words 'Limited Liability Company, 'L.L.C.," or "L.C.")	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:	
Principal Office Address: Mailing Address:	
2011 Drake Rd 2011 Drake Rd	
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 mother business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Richard Scott Ragan Registered Agent Registe	
wing been named as registered agent and to accept service of process for the above stated limited liability company at the accept the appointment as registered agent and agree to act in this capacity. I	
ther agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I	

На pla fur 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)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
a thorsed menter AMBR	Laure Bogan 2011 Drake Rd Persacolat / 32:
	g: (OPTIONAL)
LE V: Effective date, if other than the date of filin ffective date is listed, the date must be specific as of filing.) If the date inserted in this block does not meet the ument's effective date on the Department of State	nd cannot be more than five business days prior to or 90 days after applicable statutory filing requirements, this date will not be listed
LE V: Effective date, if other than the date of filin ffective date is listed, the date must be specific as of filing.) If the date inserted in this block does not meet the ument's effective date on the Department of State	nd cannot be more than five business days prior to or 90 days after applicable statutory filing requirements, this date will not be listed
ELE V: Effective date, if other than the date of filin ffective date is listed, the date must be specific as e of filing.) If the date inserted in this block does not meet the nument's effective date on the Department of State ELE VI: Other provisions, if any. REQUIRED SIGNATURE:	nd cannot be more than five business days prior to or 90 days after applicable statutory filing requirements, this date will not be listed

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)