L19000149092

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
`	•	
/Ciba	/State/Zip/Phone	- 40
(City	/State/Zip/Prione	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nar	ne)
(Doc	ument Number)	
,500		
	0.00	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
\ <u> </u>		

Office Use Only



200330117252

05/20/19--01020--003 **160.00

FILED 9 MAY 20 PH 2: 2: 1 Library | 1 Libr

N CULLIGANI JUN 14 2019

COVER LETTER

TO:	New Filing Section Division of Corporations	
SUBJI	Humming	Bird Photography LLC
30B#		nited Liability Company
The en	nclosed Articles of Organization and fee(s) ar	e submitted for filing.
Please	e return all correspondence concerning this ma	ntter to the following:
		Abdon Williams
		Name of Person
	Hummi	ng Bird Photography LLC
		Firm/Company
	20	047 Discovery Circle E
		Address
	Dee	erfield Beach, Florida 33442
	C	ity/State and Zip Code abdonw@aol.com
	E-mail address: (to be used	for future annual report notification)
For furth	her information concerning this matter, please	call:
	Abdon Williams	954 263 9467
	Name of Person Ar	ea Code Daytime Telephone Number
Enclose	ed is a check for the following amount:	
]\$125.00	00 Filing Fee \$\int \text{S130.00 Filing Fee & Certificate of Status}	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327	Street Address New Filing Section Division of Corporations Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Humming Bird Photo	graphy LLC				
(Must contain	the words "Limited L	iability Company,	"L.L.C.," or "LLC.")	·		
ARTICLE II - Address: The mailing address and street addr	ess of the principal of	fice of the Limited	Liability Company is:			
Principal C	Office Address:		Mailing Address:			
2047 Disco	very Circle E		2047 Discovery Circle E			
Deerfield			Deerfield Beach			
Florida	33442		Florida 33442			
		ı.)	- } r	<u> </u>	19	
The name and the Florida street add -	_	•		SECRETARY MARKETARY	19 MAY 20	7
The name and the Florida street add -	lan	agent are: La Roche Name		SEUNE MA	19 MAY 20 P	
_	lan 309 N	agent are: La Roche Name W 35th Avenue	cceptable)	SEUNE MAN OF CH	7	
_	lan	agent are: La Roche Name W 35th Avenue	ccepiable)	SECIAL AMASSEE, FLORID	7	
_	an 309 N Florida street address	ngent are: La Roche Name W 35th Avenue (P.O. Box <u>NOT</u> ac		SEUNCHARASSEE FLORIDA	19 HAY 20 PH 2: 23	FILED

(CONTINUED)

	<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
	"MGR" = Manager MGR	
	- Intak	Abdon Williams 2047 Discovery Circle E
		Deerfield Beach 33442
		Decinicio deacif 33442
	-	
		<u> </u>
		19 MAY 20 PH
		NY 20 PH
		<u> </u>
, DOMO	(Use attachment if necessary)	
(If an ef the date <u>Note:</u> 1	LE V: Effective date, if other than the date of fective date is listed, the date must be speci of filing.)	filling: (OPTIONAL) ific and cannot be more than five business days prior to or 90 days after et the applicable statutory filing requirements, this date will not be listed as State's records.
(If an el the date <u>Note:</u> 1 the doci	LEV: Effective date, if other than the date of fective date is listed, the date must be speci of filing.) If the date inserted in this block does not me	effic 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 as
(If an el the date <u>Note:</u> 1 the doci	LE V: Effective date, if other than the date of fective date is listed, the date must be speci of filing.) If the date inserted in this block does not meaning the date inserted at the Department of	effic 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 as
(If an el the date <u>Note:</u> 1 the doci	LE V: Effective date, if other than the date of fective date is listed, the date must be speci of filing.) If the date inserted in this block does not meaning the date inserted at the Department of	effic 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 as
(If an el the date <u>Note:</u> 1 the doci	LE V: Effective date, if other than the date of fective date is listed, the date must be speci of filing.) If the date inserted in this block does not meaning the date inserted at the Department of	effic 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 as
(If an el the date <u>Note:</u> 1 the doci	LE V: Effective date, if other than the date of fective date is listed, the date must be speci of filing.) If the date inserted in this block does not meanneat's effective date on the Department of LE VI: Other provisions, if any. REOURED SIGNATURE: Signature of a/memi This document is executed I am aware that any false in	effic 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 as State's records.
(If an el the date <u>Note:</u> 1 the doci	LE V: Effective date, if other than the date of fective date is listed, the date must be speci of filing.) If the date inserted in this block does not meanment's effective date on the Department of LE VI: Other provisions, if any. REOURED SIGNATURE: Signature of a ment of this document is executed a maware that any false in constitutes a third degree feet.	the applicable statutory filing requirements, this date will not be listed as State's records. State's records. ber or an authorized representative of a member, in accordance with section 605.0203 (1) (b). Florida Statutes, formation submitted in a document to the Department of State

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

5 5.00 Certificate of Status (Optional)