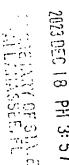
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T. J.H 1-8-24

## COVER LETTER 4

	iew Filing Sec Division of Cor			
CHERTS		Photography LLC		
SUBJECT	ı: <u></u>	Name of Lim	ited Liability Company	<del> </del>
The enclos	sed Articles of	Organization and fee(s) are	submitted for filing.	
Please retu	ırn all correspo	endence concerning this ma	tter to the following;	
	Robert J Tay	lor Jr		
			Name of Person	
	Bob Taylor I	hotography LLC		
			Firm/Company	<del></del>
	3001 W 10th	St Unit 708		
			Address	
	Panama City			
	FL 32401	Ci	ty/State and Zip Code	
	6	E-mail address: (to be used	for future annual report notificati	on)
For further i	nformation cor	ncerning this matter, please	call:	
	Robert Taylo	r 93 _at (		
	Name		rea Code Daytime Telephon	e Number
Enclosed i	s a check for th	ne 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)
	New Fi	g Address ling Section on of Corporations	Street Address New Filing Section Di The Centre of Tallaha	

P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liab	pility Company is:		
Bob Taylor Photo	ography LLC		
(Must c	ontain the words "Limited	Liability Comp	any, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and stree	et address of the principal	office of the Lin	nited Liability Company is:
<u>Prin</u>	cipal Office Address:		Mailing Address:
Robert J Taylor Jr	r		3001 W 10th St Unit 708, Panama City, FL.
(The Limited Liability Compa another business entity with a The name and the Florida stre	an active Florida registrati	on.)	ent. You must designate an individual or
	Robert J Taylor Jr		
		Name	
	3001 W 10th St Uni	it 708	
	Florida street addre	ss (P.O. Box 💥	OT acceptable)
	Panama City	Fl	32401
	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)

3 DEC 18 PH 3:

## ARTICLE IV-

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

"AMBR" = Authorized Membe	
"MCD" = Managan	er en
"MGR" = Manager	
AMBR	Sharon L Taylor 3001 W. 10th St Unit 708
	Panama City, FL 32401
<del></del>	
(Use attachment if necessary)	
of filing.) the date inserted in this block of	does not meet the applicable statutory filing requirements, this date will not b
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