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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: BLANDING VISUALS, L.L.C. (Name of Limited Liability Company)		
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Bus Florida," Certificate of Existence, and check are submitted to register the above referenced foreign liability company to transact business in Florida.		
Please return all correspondence concerning this matter to the following:		
MARCOS FAJARDO (Name of Person) BLANDING VISUALS L.L.C. (Firm/Company)		
(Firm/Company)		
1739 CHESHIRE BRIDGE RD. STE. B		
(Address)		5
ATLANTA, GA. 30324 (City/State and Zip Code)	04 OCT 25	DIVISION OF CORPCINITION
For further information concerning this matter, please call:		
ERIK CLABAUGH at 404 374 - 9196 (Name of Person) (Area Code & Daytime Telephone Number)	2: 55	
(Name of reison) (Area Code & Daytine Telephone Number)		
STREET ADDRESS: MAILING ADDRESS:		
Registration Section Registration Section Division of Corporations Division of Corporations		
409 E. Gaines Street P.O. Box 6327		
Tallahassee, Florida 32399 Tallahassee, Florida 32314		
Enclosed is a check for the following amount:		

□ \$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate

Certificate of Status Certified Copy

□ \$160.00 Filing Fee, Certified Copy

Secretary of State

Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CONTROL NUMBER : 0458510 EFFECTIVE DATE : 10/01/2004 JURISDICTION : GEORGIA REFERENCE : 0044

PRINT DATE : 10/01/2004

FORM NUMBER : 356

ALAN I. BEGNER BEGNER & BEGNER, P.C. 1280 WEST PEACHTREE ST., SUITE 230 ATLANTA, GA 30309

CERTIFICATE OF ORGANIZATION

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

BLANDING VISUALS, L.L.C. A GEORGIA LIMITED LIABILITY COMPANY

has been duly organized under the laws of the State of Georgia on the effective date stated above by the filing of articles of organization in the Office of the Secretary of State and by the paying of fees as provided by Title 14 of the Official Code of Georgia Annotated.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on the date set forth above.





Cathy Cox Secretary of State

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503. FLORIDA STATUTES THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: (Jurisdiction under the law of which foreign limited liability company is organized) (Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: SALC TRINTAL OF DU Signature of a member of an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes

an affirmation under the penalties of perjury that the facts stated herein are true.)

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

2. The name and			Fajor (Name)	Λ		_
	915	N.W.	ess (P.O. Box NO	12	Miari.	_
	Apt 3	3008	FL City/State/Zip	3	3136	_
liability company agent and agree relating to the pr	ned as registered oat the place de to act in this cap oper and compl	d agent and to signated in th pacity. I furth ete performan	accept service of accept service of accept service is composed to compose of my duties,	of pro ereby oly wi and I	cess for the above accept the appoint th the provisions of am familiar with appeter 608, Florida	tment as registe f all statutes and accept the

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)