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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entry Name)
(Document Number)
(=======,
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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COVER LETTER

	ew Filing Sec ivision of Cor							
CUBICCT		s Photography LLC						
SUBJECT	:	Name	of Limite	d Liabilit	ty Company		_	
The enclose	ed Articles of	Organization and fe	ec(s) are su	abmitted	for filing.			
Please retu	rn all correspo	ondence concerning	this matter	r to the fo	ollowing:			
	Henry R. Bli	ss						
				Name of I	Person			
				Firm/Cor	mpany			
	1241 NW 7t	h St					7	7,1202
				Addre	ess		- -	7
	Boca Raton,	FL 33486					3 (E.) (2) (C.)	יי ניט מר
	henrybliss280	@gmail.com	City	/State and	1 Zip Code		('(r.)	15 (2) (15 (a) (b) (b) (b) (b) (c) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c
-			oe used for	r future a	nnual report notificati	on)	<u> </u>	⇒ 7
For further i	nformation co	ncerning this matter	, please ca	ali:				
	Henry R. Bli	SS	630 at (659 9489			
	Nam	e of Person		Code	Daytime Telephon	e Number	_	
Enclosed is	s a check for t	he following amoun	it:					
□\$125.00	Filing Fee	■\$130.00 Filing Certificate of Sta	itus	Certifie	5.00 Filing Fee & ed Copy al copy is enclosed)			tus &
	•	ng Address			Street Address			
		iling Section on of Corporations			New Filing Section Di The Centre of Tallaha			
	P.O. B	30x 6327			2415 N. Monroe Street			
	Tallah	assee, FL 32314		•	Tallahassee, FL 3230	خ		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Henry Bliss Photograp				
(Must contai	n the words "Limited Li	iability Company	"L.L.C.," or "LLC.")	
RTICLE II - Address: e mailing address and street add	dress of the principal off	fice of the Limite	I Liability Company is:	
<u>Principal</u>	Office Address:		Mailing Addres	<u>is</u> :
1241 NW 7th St. Boca	Raton, FL 33486	124	LNW 7th St. Boca Raton, F	1. 33486
ne Limited Liability Company o	annot serve as its own I	Registered Agent		vidual or
ne Limited Liability Company on ther business entity with an ac	annot serve as its own I tive Florida registration	Registered Agent		vidual or
RTICLE III - Registered Ager he Limited Liability Company of other business entity with an ac- ne name and the Florida street ac-	annot serve as its own I tive Florida registration ddress of the registered a Henry R. Bliss	Registered Agent i.) agent are:		vidual or
he Limited Liability Company on ther business entity with an ac	annot serve as its own I tive Florida registration ddress of the registered a Henry R. Bliss	Registered Agent		vidual or
he Limited Liability Company of other business entity with an ac	annot serve as its own I tive Florida registration ddress of the registered a Henry R. Bliss	Registered Agent i.) agent are:		vidual or
he Limited Liability Company of other business entity with an ac	annot serve as its own I tive Florida registration ddress of the registered a Henry R. Bliss	Registered Agent agent are: Name	You must designate an indiv	vidual or
he Limited Liability Company of other business entity with an ac	annot serve as its own I tive Florida registration ddress of the registered a Henry R. Bliss	Registered Agent agent are: Name	You must designate an indiv	vidual or

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

4.841313	Homes D. Dlina		
AMBR	Henry R. Bliss 1241 NW 7th St		
	Boca Raton, FL 33486		
			
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f filing.) the date inserted in this block doe	s he specific and cannot be more than five bus s not meet the applicable statutory filing requir	iness days prior to	o or 90 d
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EV: Effective date, if other than the ctive date is listed, the date must filling.) the date inserted in this block does nent's effective date on the Depart EVI: Other provisions, if any. REOUIRED SIGNATURE: Signature of This document is I am aware that ar	s he specific and cannot be more than five buses not meet the applicable statutory filing requirement of State's records.	of a member. (1) (b). Florida State the Department of	o or 90 d

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)