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



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N. Guillean JUN 28 2012

Mustafa H. M. Hutchinson
11-140 S.W. 196+9 Apt C410
Mami Flonda 33157
(772) 646-1168
Muziq 87 Legendayahoo.com

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Quintessentia"L" Intellection "Z" Entertainment 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:
Mustafa Hasan Meinfian Hutchinson
Name of Person
Firm/Company
11140 S.W. 196th St Apt. C410
Address
Miami, Florida 33157
City/State and Zip Code
Muziq87legend@yahoo.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Mustafa Hutchinson at (772) 646-1168
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \times \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed}}
Mailing Address Street/Courier Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	ection "Z" Entertainment LLC "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	ess of the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
	11140 S.W. 196th St Apt.C410 Miami, Florida 33157

Mustafa Hasan Meinfian Hutchinson

Name

11140 SW 196th St. Apt.C410

Florida street address (P.O. Box NOT acceptable)

Miami

_{FL} 33157

City, State, and 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 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGR	Mustafa Hasan Meinfian Hutchinson
	11140 S.W. 196th St Apt C410
	Miami, Florida
	
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(Use attachment if necessary)	
ICLE V: Effective date, if other than a effective date is listed, the date muse 90 days after the date of filing.)	the date of filing: (OPTIONAL) st be specific and cannot be more than five business days prior
•	7
REQUIRED SIGNATURE:	AAT LANGE
	HASSEE,
	THE THE THE
Signature of a me	ember or an authorized representative of a member.
constitutes an affirmation t I am aware that any false in	n 608.408(3), Florida Statutes, the execution of this documents under the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State relony as provided for in s.817.155, F.S.)
	M. Hutchinson

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)

Typed or printed name of signee