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SECRETARY OF STATE

SECRETARY OF STATE

J. BRYAN

JAN - 8

EXAMINER

(850) 245-6051.

COVER LETTER

TO:

Registration Section Division of Corporations

Taylored TV

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please

Please return all correspon	dence concerning this matt	er to the following:	
Jonathar	n Taylor		
		Name of Person	
 		Firm/Company	
PO Box	540178		
	· · · · · · · · · · · · · · · · · · ·	Address	
Orlando	FL 32854	·	
		y/State and Zip Code	
tayloredtv@	earthlink.net		
	E-mail address: (to be used f	or future annual report notification)	
For further information con	ncerning this matter, please	call:	
Jonathan Ta	aylor	310 774-1	074
Name of	Person	Area Code & Daytime Tel	ephone Number
Enclosed is a check for	the following amount:		
■\$125.00 Filing Fee	2\$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

Mailing Address

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

Street/Courier Address

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

(additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
	TALLAHASSI P
	是是一
Taylored TV LLC	
(Must end with the words "Limited Liabil	ty Company, "L.L.C.," or "LLC.").
ARTICLE II - Address:	Cart C
The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1304 Gunnison Avenue	PO Box 540178
Orlando FL 32804	Orlando FL 32854
The name and the Florida street address of the r Jonathan Taylor	egistered agent are:
Name	
Name	
1304 Gunnison Avenue	ress (P.O. Box NOT accentable)
1304 Gunnison Avenue Florida street add	tress (P.O. Box <u>NOT</u> acceptable)
1304 Gunnison Avenue Florida street add Orla	iress (P.O. Box <u>NOT</u> acceptable) indo FL 32804 ate, and Zip

Page 1 of 2

<u>litle:</u>	Name and Address:
MGR" = Manager	
'MGRM" = Managing Member	THE THE PERSON NAMED IN COLUMN TO TH
MGR	Jonathan Taylor
	PO 80x 540178
	Orlando FL 32854
 	
Tise attachment if necessary)	
(Use attachment if necessary)	
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of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)