Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

900003288299--6 -06/14/00--01037--007 \*\*\*\*130.00 \*\*\*\*130.00

SUBJECT:

Axe Multimedia Entertainment Group, LLC

(Proposed limited liability company name - must include suffix)

Enclosed is an original and one (1) copy.

Filing fee for articles of organization of Florida Limited Liability Company:

\$100.00 Filing fee for Articles of Organization \$25.00 Designation of Registered Agent

A letter of acknowledgement will be issued free of charge upon filing. Please submit an additional \$5 if a certificate of status is needed. The fee for a certified copy is \$30. Please send one check for the total amount made payable to the Florida Department of State.

FROM:	Adrian Anderson	: 1
	Name (Printed or typed)	
	395 NE 21 Street, Suite 502	
	Address	
	Miami, Florida 33137	100-7041
	City, State & Zip	
	305 571 9754	Name Availability College
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### TRANSMITTAL LETTER

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FROM:	Adrian Anderson	SECRETAI ALLAHASI	00 JUN 12	<u> </u>
	Name (Printed or typed)			[_
	395 NE 21 Street, Suite 502	OF ST	th Wd	
	Address		: 20	
	Miami, Florida 33137	Am	0	
·	City, State & Zip	<u> </u>	د	
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	Daytime Telephone number	!		

# 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 compa	any is:A <u>xe Multimedia</u>	Entertainme	nt Group,	LLC
2. The name and the		s of the registered agent a	re:		_
	<u>    Adrian Ander</u>	son	! <del>**</del>		
		Name		86 8	-
	395 NE 21 St	reet Suite 502		XETA JUNI F	
	Florida street add	dress (P.O. Box NOT ACCEPTAE	BLE)	2 -	/-
	Miami,	FL 33137		PH LI	
		CITY, STATE AND ZIP		≥ ~	

Having been names as registered agent and to accept service of process for the above stated; limited l; liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

SIGNATURE

Filing Fee: \$25 for Designation of Registered Agent

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

Axe Multimedia Entertainment Group, LLC

#### **ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

395 NE 21 Street Suite 502 Miami, FL 33137

### **ARTICLE III - Registered Agent**

The name and street address of the initial registered agent are:

Adrian Anderson 395 NE 21 Street Suite 502 Miami, FL 33137

### **ARTICLE IV - Management:**

(Check the appropriate box)

The Limited Liability Company is to be a manager-managed company. 

The Limited Liability Company is to be managed by the members.

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Adrian Anderson

Typed or printed name of signee

Filing Fee: \$100.00 for Articles