

L000000009468

6509 MANI-O-WAR TR.

Address

TALLAHASSEE, FL 32308

City/State/Zip

Phone #

850-668-2167

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. LONE PALM FILMS LLC
(Corporation Name) L-9468 (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

RECEIVED
00 AUG -8 PM 12:07
DIVISION OF CORPORATION

- ☒ Walk in ☐ Pick up time ☒ Certified Copy
☐ Mail out ☒ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☒ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

200003349322--D
-08/08/00--01044--005
****155.00 ****155.00

FILED
00 AUG -8 PM 12:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2/8/8

00 AUG -8 PM 12:11

FILED

Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: LONE PALM FILMS, LLC

ARTICLE II - Address:

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

450 ST. FRANCIS STREET
TALLAHASSEE, FLORIDA 32301

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

STEVEN CHASE
Name
450 ST. FRANCIS STREET
Florida street address (P.O. Box **NOT** acceptable)
TALLAHASSEE, FL 32301
City, State, and Zip

00 AUG -8 PM 12:11
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Article IV - Management (Check box if applicable.)

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)


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

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

STEVEN CHASE
Typed or printed name of signee

00 AUG -8 PM 12:11
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fees:

\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)