## LOODOO 14333 Requester's Name P.O. Box 202568 - Hake Suina Vista, Fl. 32830

City/State/Zip

Phone #

Office Use Only

**Examiner's Initials** 

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CR2E031(7/97)

10-31-00

Pro Am Entertainment L.L.C, P.O. Box 22568 Lake Buena Vista FL 32830

Agent: Ronald Stewart Email @ ronald\_stewart@hotmail.com or trentandeve2@excite.com

Telephone # 407.864.7989 cell

407.238.5399 this number will be active week of november 1 (local carrier

problem)

Thank you

Ronald Stewart

OO NOV 20 PM 4: 41 SECRETARY OF STATE



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

November 8, 2000

RONALD STEWART P.O. BOX 22568 LAKE BUENA VISTA, FL 32830

SUBJECT: PRO AM ENTERTAINMENT

Ref. Number: W00000026740

We have received your document for PRO AM ENTERTAINMENT and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "L.C." or "L.L.C."

Please return your document, along with a copy of this letter, within 60 days gour filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6020.

Tammi Cline Document Specialist

Letter Number: 100A00057868

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is: PRO AM ENTER TAIN MENT 1.2
ARTICLE II - Address:  The mailing address and street address of the principal office of the Limited Liability Company is:  P.O. BOX 22568  /0524 DEmilo PL #/03  LAKE BUENA Dista, FL 32830  ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Name PL # 10524 DEMI 10 PL # 103  Florida street address (P.O. Box NOT acceptable)  OR LANDO FL 32836  City, State, and Zip  Having been named as registered agent and to accept service of process for the above stated finished ?
liability company at the place designated in this certificate, I hereby accept the appointment description 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 autials mayot be added if an affective data in uppresent d)

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.)

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

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\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)