0000015160

MUSCO & Company, P.A.

40 N. Osprey Ave., Suite D Sarasota, FL 34236

City/State/Zip

Phone #

		Office Use Only
CORPORATION_NAME(S) & DOO	CUMENT NUMBER(S), (if I	known):
1. THE STUDIO,	LLC	· · · · · · · · · · · · · · · · · · ·
(Corporation Name)	(Document #)	
2	1001	
(Corporation Name)	(Document #)	
3.		
(Corporation Name)	(Document #)	
4		0000045398906 -09/06/0101005012
(Corporation Name)	(Document #)	*****25.00 *****25.00 [°]
☐ Walk in ☐ Pick up time		Certified Copy
☐ Mail out ☐ Will wait	Photocopy	Certificate of Status
NEW FILINGS Profit Not for Profit	AMENDMENTS Amendment Designation of P. /	000004539890——6 -08/17/01—01040—004 ****100.00 ****100.00
Limited Liability Domestication Other	Change of Registe Dissolution/Withd Merger	red Agent
OTHER FILINGS Annual Report Fictitious Name	REGISTRATION/QU Foreign Limited Partnershi Reinstatement Trademark Other	EP -

Examiner's Initials



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

August 21, 2001

MUSCO & COMPANY, P.A. 40 N. OSPREY AVENUE, SUITE D SARASOTA, FL 34236

SUBJECT: THE STUDIO, LLC Ref. Number: W01000019368

We have received your document for THE STUDIO, LLC and check(s) totaling \$100.00. However, the document has not been filed and is being retained in this office for the following reason(s):

There is a balance due of \$25.00. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers Document Specialist

Letter Number: 001A00047694

DIVISION OF CORPORATIONS

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	-	
The name of the Limited Liability Company is:		
THE STUDIO, LLC		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Compa 6/6 A NORTH TAMIAMI TRAIL SARA SOTA, FL 34275 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:	my is	:
The name and the Florida street address of the registered agent are:		
MARIETYSEULT LEGER		
MARIETYSEULT LEGER Name 616 A N. TAMIAMI TRAIL Florida street address (P.O. Box NOT acceptable) SARASOTA FL 3 Y275 City, State, and Zip		-
Having been named as registered agent and to accept service of process for the above stated liability company at the place designated in this certificate, I hereby accept the appointment a registered agent and agree to act in this capacity. I further agree to comply with the provision statutes relating to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.	s ıs of a	
Article IV - Management (Check box if applicable.) The Limited Liability Company is to be managed by one manager or more managers an therefore, a manager - managed company.	01 SEF -5	SECRETAR DIVISION OF C
(An additional article must be added if an effective date is requested) Signature of a member or an authorized representative of a member.	AH 9: 39	ORPORATIONS
(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.)		
MARIEN SEULT LEGER Typed or printed name of signee		77
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)