



L020000011946

ACCOUNT NO. : 072100000032

REFERENCE : 570396 7336006

AUTHORIZATION :

Patricia Pigato

COST LIMIT : \$ 125.00

ORDER DATE : May 8, 2002

ORDER TIME : 12:18 PM

ORDER NO. : 570396-001

CUSTOMER NO: 7336006

CUSTOMER: Ms. Charmaine Laing
Ms. Charmaine Laing

7868 Nw 17th Place

Pembroke Pines, FL 33024

DOMESTIC FILING

NAME: LAING AND LEVERMORE
PRODUCTIONS, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 1156

EXAMINER'S INITIALS: _____

FILED
02 MAY 13 PM 3:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AL1

100005555691--3

RECEIVED
02 MAY 16 PM 1:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

LAING AND LEVERMORE PRODUCTIONS, LLC

ARTICLE II - Address:

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

7868 NW 17TH PLACE, PEMBROKE PINES, FLORIDA 33024

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

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

CHARMAINE LAING

Name

1418 NE 150 STREET

Florida street address (P.O. Box **NOT** acceptable)

NORTH MIAMI FL 33161

City, State, and Zip

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.

CHARMAINE LAING

By: CHARMAINE LAING

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)

Deborah D. Skipper

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.)

DEBORAH D. SKIPPER

Typed or printed name of signer

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)

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TALLAHASSEE, FLORIDA

LAING AND LEVERMORE PRODUCTIONS, LLC

MEMBERS LIST

CHARMAINE LAING
7868 NW 17TH PLACE
PEMBROKE PINES, FL 33024

ANDREA LEVERMORE
224 WEBSTER STREET NE #1
WASHINGTON, DC 20011

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TALLAHASSEE, FLORIDA

sxk

FILE COPY

LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of LAING AND LEVERMORE PRODUCTIONS, LLC (the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

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TALLAHASSEE, FLORIDA

This Limited Power of Attorney is executed on this ^{15th} day of May, 2002

Charmaine Laing
Signature

Charmaine Laing
Print Name of Signer

WITNESS:

Michael Fruchter
Signature

Michael Fruchter
Print Name of Witness

WITNESS:

Russell Bailey
Signature

Russell Bailey
Print Name of Witness

Sworn to and subscribed before me on this 15th day of May, 2002.

Alvin Wm. Roberts
ALVIN WM. ROBERTS
Notary Public/State of Florida

