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(Address)

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(City/State/Zip/Phone #)

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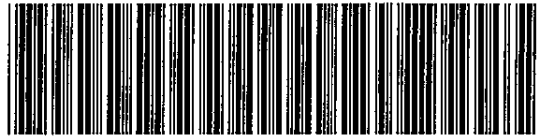
(Business Entity Name)

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*Law Offices of*  
**JOHN P. KELLOGG**

*Member of the Bar  
In the States of  
• New York and Ohio*

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1285 Avenue of the Americas  
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jpkellog@ptd.net

October 30, 2002

Registration Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

Re: Articles of Organization of Ful of Drama, LLC

Dear Sirs,

Enclosed please find the above-referenced Articles of Organization for processing with your department. Also enclosed is the required filing fee of \$125.00.

I would appreciate your cooperation in processing this document and forwarding a Acknowledgement of Registration or other correspondence directly to my client, Robert Heck II at 11044 Prospector Drive, Jacksonville, Florida 32218, (904) 924-2385.

If you have any questions you can reach me at (212) 554-4240.

Very Truly Yours,

  
John P. Kellogg

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TALLAHASSEE, FLORIDA

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:  
Ful of Drama Records, LLC

## ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:  
11044 Prospector Drive, Jacksonville, Florida 32218

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

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

Robert Heck II  
\_\_\_\_\_  
Name  
11044 Prospector Drive  
\_\_\_\_\_  
Florida street address (P.O. Box **NOT** acceptable)  
Jacksonville, \_\_\_\_\_ FL 32218  
\_\_\_\_\_  
City, State, and Zip

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*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.*

X Robert Heck II  
\_\_\_\_\_  
Registered Agent's Signature

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

X Robert Heck II  
\_\_\_\_\_  
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.)

Robert Heck II  
\_\_\_\_\_  
Typed or printed name of signee

### 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)