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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850) 205-0383

From:
Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

2/27/03

LIMITED LIABILITY COMPANY

DLW ENTERTAINMENT LLC

FILED
03 FEB 27 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
03 FEB 27 PM 1:40
DIVISION OF CORPORATION

Certificate of Status	0
Certified Copy	1
Page Count	03
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**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY**

③

ARTICLE I - Name:

The name of the Limited Liability Company is:

DLW Entertainment LLC

Article II - Address:

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

435 NW 14th Terrace
Ft. Lauderdale, FL 33311

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

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

David C. Waring
Name

435 NW 14th Terrace
Florida street address (P.O. Box NOT acceptable)

Ft. Lauderdale, FL 33311
City, State, and Zip

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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 606, F.S..

[Signature]
Registered Agent's Signature

ARTICLE IV - Management / Members

The name(s) and address(es):

Lydia V. Waring
435 NW 14th Terrace
Ft. Lauderdale, FL 33311

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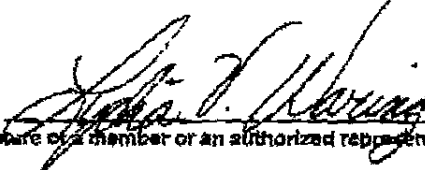
TOTAL P.03

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ARTICLE V - 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 606.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

LYDIA V. WARNIG
Typed or printed name of signee

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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