103000021018

| (Re | equestor's Name) | |
|-------------------------|--------------------|-------------|
| (Ac | ldress) | · |
| (Ad | dress) | |
| (Cit | ty/State/Zip/Phone | o#) |
| PICK-UP | ☐ WAIT | |
| (Bu | siness Entity Nam | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |
| | | |

Office Use Only



500019073725

05/19/03--01072--008 **100.00

06/03/03--01039--003 **25.00

16/11

03 JUN -9 AM 9

ON OF CORPORATIONS

4

May 15, 2003

To: Florida Department of State Registration Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

From: Stacey Fenley 836 Espanola Way Miami Beach, Fl 33139

305-535-6233

W03-14693

Enclosed is a check for \$100.00 to cover filing fees for articles of organization.

Thank you.

FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 22, 2003

STACEY FENLEY 836 ESPANOLA WAY MIAMI BEACH, FL 33139

SUBJECT: ARTVENTURE, L.L.C. Ref. Number: W03000014693

CIVISION OF CORPORATIONS

We have received your document for ARTVENTURE, L.L.C. and check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

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

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return your document, along with 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: 903A00032093

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: |
|--|
| The name of the Limited Liability Company is: |
| Artventure, L.L.C. |
| ARTICLE II - Address: |
| The mailing address and street address of the principal office of the Limited Liability Company is: 836 Espanola Way Miami Beach, FL 33139 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: |
| The name and the Florida street address of the registered agent are: |
| LOTATEN FENLEY |
| Name_ |
| Florida street address (P.O. Box NOT acceptable) |
| 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. [An additional article must be added if an effective date is requested] Signature of a number 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.) |
| STACEY E. FENLEY 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)