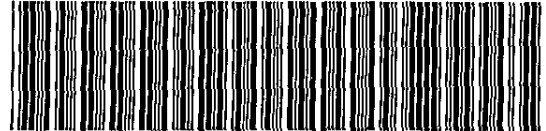


**L03000023992**

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA



900020894659

06/18/03--01016--007 \*\*125.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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*L03-23992*

*W03-18241*

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
03 JUL -1 PM 2:30

Att:  
Nanette

I'm giving you permission to  
file my Articles of Organization  
under the name FADE'em ALL RECORDS  
& correct the spelling ~~FADE~~'em ALL  
RECORDS in all Caps as shown.

Thank you,  
Joseph T. Harmon

Joseph T Harmon

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

FADE'EM ALL RECORDS LLC

## ARTICLE II - Address:

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

8372 Beacon Blvd., #203  
Ft. Myers, FL 33907

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

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

Joseph T. Harmon  
Name  
8372 Beacon Blvd., #203  
Florida street address (P.O. Box NOT acceptable)  
Ft. Myers FL 33907  
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..*

Joseph T. Harmon  
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)

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.)

Joseph T. Harmon  
Typed or printed name of signee

Joseph T. Harmon

### 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)