

L03000027793

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

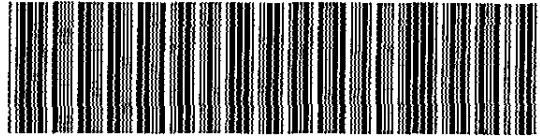
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



500021718535

07/24/03--01037--003 \*\*125.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

03 JUL 24 PM 12:55

FILED

7/29  
must

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Mass Mania Productions, LLC  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jean Mazmanian  
(Name of Person)

(Firm/Company)

3619 Coral Tree Circle  
(Address)

Coconut Creek, FL 33073  
(City/State and Zip Code)

For further information concerning this matter, please call:

Jean Mazmanian at ( 954 ) 257-1537  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

03 JUL 24 PM 12:55

FILED

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:  
Mass Mania Productions, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

3619 Coral Tree Circle  
Coconut Creek, FL 33073

**Mailing Address:**

3619 Coral Tree Circle  
Coconut Creek, FL 33073

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

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

Jean Mazmanian

Name

3619 Coral Tree Circle

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

Coconut Creek FL 33073

City, State, and Zip

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

03 JUL 24 PM 12:55

FILED

*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..*

Registered Agent's Signature

(CONTINUED)

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR	Jean Mazmanian
	3619 Coral Tree Circle
	Coconut Creek, FL 33073

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

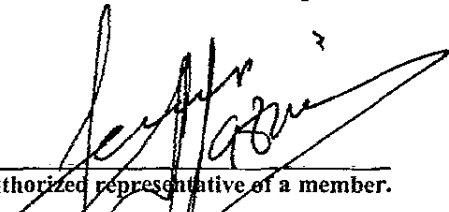
03 JUL 24 PM 12:55

**FILED**

(Use attachment if necessary)

**NOTE: An additional article must be added if an effective date is requested.**

**REQUIRED SIGNATURE:**

  
\_\_\_\_\_  
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.)  
JEAN MAZMANIAN  
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)