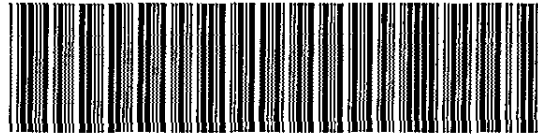


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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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01/21/04--01006--003 **100.00

02/12/04--01003--005 **25.00

(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:

W04-3447

Office Use Only

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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

FILED

04 FEB -3 PM 3:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

January 28, 2004

KIYO ODEN
1601 18TH STREET NW, SUITE ONE
WASHINGTON, DC 20009

SUBJECT: BOSTICK LOPEZ ENTERTAINMENT, LLC
Ref. Number: W04000003447

We have received your document for BOSTICK LOPEZ ENTERTAINMENT, LLC and your check(s) totaling \$100.00. However, the document has not been filed and is being retained in this office for the following:

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

There is a balance due of \$25.00.

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) 245-6094.

Agnes Lunt
Document Specialist

Letter Number: 504A00005448

THE ODEN FIRM, P.C.
ATTORNEYS AT LAW
1601 18TH STREET, NW
SUITE ONE
WASHINGTON, DC 20009

KIYO D. ODEN

FILED
04 FEB -3 PM 3:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
TELEPHONE: 202-299-9500
FAX: 202-299-9696
EMAIL: KODEN@ODENFIRM.COM

February 4, 2004

Ms. Agnes Lunt
Document Specialist
Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Articles of Incorporation – Bostick Lopez Entertainment, LLC

Dear Ms. Lunt:

We are resubmitting for filing the following:

- Articles of Organization for Bostick Lopez Entertainment, LLC

As you are already in receipt of a check in the amount of \$100.00 for the Florida Limited Liability Company filing fee, included is a check in the amount of \$25.00 for the Registered Agent Designation fee for the aforementioned entity. Please telephone us at the number printed above with any questions or comments with regard to this matter. Also, please return the confirmation letter to the address printed above.

Sincerely,



Kiyoo D. Oden

Enclosures
KDO/arm

THE ODEN FIRM, P.C.
ATTORNEYS AT LAW
1601 18TH STREET, NW
SUITE ONE
WASHINGTON, DC 20009

FILED
04 FEB -3 PM 3:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

KIYO D. ODEN

TELEPHONE: 202-299-9500
FAX: 202-299-9696
EMAIL: KODEN@ODENFIRM.COM

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bostick Lopez Entertainment, 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:

Kiyo Oden, Esq.
(Name of Person)

The Oden Firm, P.C.
(Firm/Company)

1601 18th Street, NW, Suite One
(Address)

Washington, DC 20009
(City/State and Zip Code)

For further information concerning this matter, please call:

Kiyo Oden, Esq. at (202) 299-9500
(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

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

FILED
04 FEB -3 PM 3:1
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

BOSTICK LOPEZ ENTERTAINMENT, LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

2157 Bacom Point Road
Pahokee, Florida 33476

Same

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

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

Nelson Lopez, Sr.

Name

2157 Bacom Point Road

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

Pahokee, FLORIDA 33476

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, Florida Statutes.


Registered Agent's Signature

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:

MGRM

Nelson Lopez, Sr.
2157 Bacom Point Road
Pahokee, Florida 33476

MGRM

Bobby Bostick
4194 Hibiscus Circle
West Palm Beach, FL 33409

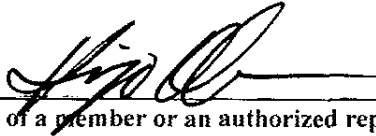
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.)

Kivo Oden, Esq. attorney-in-fact

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)

THE ODEN FIRM, P.C.
ATTORNEYS AT LAW
1601 18TH STREET, NW
SUITE ONE
WASHINGTON, DC 20009

FILED

04 FEB -3 PM 3:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

KIYO D. ODEN

TELEPHONE: 202-299-9500
FAX: 202-299-9696
EMAIL: KODEN@ODENFIRM.COM

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bostick Lopez Entertainment, 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:

Kiyo Oden, Esq.
(Name of Person)

The Oden Firm, P.C.
(Firm/Company)

1601 18th Street, NW, Suite One
(Address)

Washington, DC 20009
(City/State and Zip Code)

For further information concerning this matter, please call:

Kiyo Oden, Esq. at (202) 299-9500
(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

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

FILED

04 FEB -3 PM 3:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I – Name:

The name of the Limited Liability Company is:

BOSTICK LOPEZ ENTERTAINMENT, LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

2157 Bacom Point Road
Pahokee, Florida 33476

Same

ARTICLE III – Registered Agent, Registered office, & Registered Agent's Signature:

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

Nelson Lopez, Sr.

Name

2157 Bacom Point Road

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

Pahokee, FLORIDA 33476

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, Florida Statutes.

Registered Agent's Signature

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:

04 FEB -3 PM 3:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MGRM

Nelson Lopez, Sr.

2157 Bacom Point Road

Pahokee, Florida 33476

MGRM

Bobby Bostick

4194 Hibiscus Circle

West Palm Beach, FL 33409

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.)

Kiyo Oden, Esq. attorney-in-fact

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)