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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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(Requestor's Name)

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(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: Bayfront Productions, LLC

(Name of Limited Liability Company)

Please return all correspondence concerning this matter to the following:

Miroslav Beck

(Name of Person)

Bayfront Productions, LLC

(Firm/Company)

5350 Algerine Pl.

(Address)

Wesley Chapel, FL 33544

(City/State and Zip Code)

Miroslav Beck

at (813

994 9549

(Name of Person)

(Area Code & Daytime Telephone Number)

MAILING ADDRESS:

Registration Section

Division of Corporations

409 E. Gaines Street

Tallahassee, Florida 32399

Registration Section

Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

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

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TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

Bayfront Productions, LLC

ARTICLE II - Address:

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

Principal Office Address:

5350 Algerine Pl.

Wesley Chapel, FL 33544

Mailing Address:

5350 Algerine Pl.

Wesley Chapel, FL 33544

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

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

Miroslav Beck

Name

5350 Algerine Pl.

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

Wesley Chapel

FLORIDA 33544

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

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TALLAHASSEE, FLORIDA

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

Miroslav Beck

5350 Algerine Pl.

Wesley Chapel, FL 33544

MGR

Erica J. Beck

5350 Algerine Pl.

Wesley Chapel, FL 33544

(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.)

Miroslav Beck

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)