

W04600014257

Florida Department of State

Division of Corporations

Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H04000038718 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

Phone : (305)634-3694

Fax Number : (305)633-9696

LIMITED LIABILITY COMPANY**sigh productions, llc**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

FILED

04 FEB 23 PM 1:41

RECEIVED

04 FEB 23 PM 1:20

DIVISION OF CORPORATION

W04-14257
AK

③

H0410000038718

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

SIGH PRODUCTIONS, LLC

ARTICLE I

The name of the Limited Liability Company shall: SIGH PRODUCTIONS, LLC

ARTICLE II

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the Act.

ARTICLE III

The mailing address and street address of the principal office of the Limited Liability Company is: 1590 EAST GOLFVIEW DRIVE, PEMBROKE PINES, FL 33026.

ARTICLE IV

The name and the Florida street address of the registered agent are:
HENRY MAINER JR., 1590 EAST GOLFVIEW DRIVE, PEMBROKE PINES,
FL 33026.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 FEB 23 PM 1:14

FILED

H0410000038718

H040000038718

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED
OFFICE/MEMBER/REPRESENTATIVE

SIGH PRODUCTIONS, LLC
(Name of Company)

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization, 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.

Henry Mainer Jr.

Registered Agent
HENRY MAINER JR.

FILED
FEB 23 PM 1:41
CLERK OF STATE
TALLAHASSEE, FLORIDA

Henry Mainer

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.)

HENRY MAINER JR.

Typed or printed name of signee

1 IN 1477738718