

LD 4000018652

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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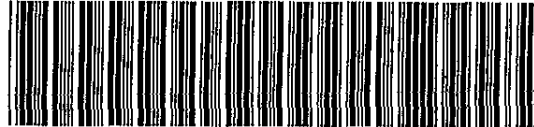
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LD 4-18652
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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CARIBBEAN NETWORK TELEVISION, LLC

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

Please return all correspondence concerning this matter to the following:

Joseph L. Welch

CARIBBEAN NETWORK TELEVISION, LLC

8181 NW 36th Street, Ste. 15

Miami, Florida 33166

For further information concerning this matter, please call:

Joseph L. Welch

305-418-2337

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

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

ARTICLE I – Name

The name of the Limited Liability Company is:

Caribbean Network Television, LLC

ARTICLE II – Address:

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

Principal Office Address:

**8181 NW 36th Street, Ste. 15
Miami, FL 33166**

Mailing address:

**8181 NW 36th Street, #15
Miami, FL 33166**

ARTICLE III – REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

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

Joseph L. Welch

8181 NW 36th Street, Ste. 15

Miami, FL 33166

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..


Joseph L. Welch

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TALLAHASSEE, FLORIDA

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ARTICLE IV-Manager(s) 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:

Manager

Wayne O. LeBlanc
8181 NW 36th Street, Ste. 15
Miami, Fl. 33166

Managing Member

Joseph L. Welch
8181 NW 36th Street, Ste. 15
Miami, Fl. 33166

Managing Member

Michael A. Aitcheson
8181 NW 36th Street, Ste. 15
Miami, Fl. 33166

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TALLAHASSEE, FLORIDA

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(Use attachment if necessary)

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

REQUIRED SIGNATURE:

Wayne O. LeBlanc

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 L. Welch

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)