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(Requestor's Name)
(Address)
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(Address)
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
,
(Business Entity Name)
(Document Number)
,
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## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: Production Tours, 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:
Brett Page Wier (Name of Person)
Production Tours (Firm/Company)
3491-11 Thom as ville RJ #138
Tall 9h 95588 FL 32309 (City/State and Zip Code)
For further information concerning this matter, please call:
Breff Page Wier at (850) 445-0712  (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

The name of the Limited Liability Company is:
Production Tours, LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company 3:
Principal Office Address: Mailing Address:
3491-11 Thomasville N# 138 5 ame
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
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
Brett Page Will
Registered Agent's Signature

(CONTINUED)

The name and address of each Ma	nager or Managing Member is as follows:
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Brett Page Wier 3491-11 Thomas wille RI #13 Tallah asser, FL 32309
(Use attachment if necessary)	
NOTE: An additional article m	ust be added if an effective date is requested.
REQUIRED SIGNATURE:	ett Page Wee
Signature of a m	ember or an authorized representative of a member.
of this document	ith section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury ed herein are true.)  Hard or printed name of signee
	Types of printed hame of signee

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

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)