L04000038740

(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:
- Control of the cont





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U5/24/U4--U1002--U10 **155.00

SECRETATION STATE
TALLAMY SEE, FLORIDA

04 MAY 21 PH 4: 27





TRANSMITTAL LETTER

UBJECT:	MY PEOPLE	ENTERTAINMENT. Name of Limited Liability Con	LLC.	<u></u>
	(1	Name of Limited Liability Con	npany)	-
he enclosed Articl	es of Organization an	d fee(s) are submitted for filing	g .	
lease return all cor	respondence concern	ing this matter to the following	ŗ	
TECHE	ח ה'מבור			
Jesus ,	P. D'NEILC (Name of Perso	n) ···	-	
			-	₹.0
			- <u>-</u>	TALL 041
		BIND. # 753	- <u>-</u>	TALLAHAY 04 MAY
	PLE ENTERT SEMOLAN	BIND. # 753	<u>. </u>	TALLAHASSE 04 MAY 21
My PEC 4546 S	GLE ENTERT SEMORAL (Firm/Company	BIND. # 753	•	TALLAHASSEE, FL
My PEC 4546 S	GLE ENTERT SEMORAL (Firm/Company	BIND. # 753	- - -	TALLAHASSEE, FLORI
My PEO 4546 S 4546 S.	GIL ENTERT SEMORAN (Firm/Company SEMORAN BI	1. NMENT, 46. BLND. #753)	-	O4 MAY 21 PM 4: 27

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

(Name of Person)

MAILING ADDRESS:

(Area Code & Daytime Telephone Number)

Registration Section

Division of Corporations
P.O. Box 6327

Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	•								
A	RTI	CL	\mathbf{E}	I	_	N	aı	n	C:

The name of the Limited Liability Company is:

MY PEOPLE ENTERTAINMENT, LLC.

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

P.O. BOX 621533 Orlando FL 32862

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

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

JES45 P. O'NE,'16 Name

1275 W. DONEGAN AVE. #A
Florida street address (P.O. Box NOT acceptable)

K'SS' MMEE FL 3474/
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 Tam familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature

(CONTINUED)

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

The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MANAGER	JESUS P. D'NEILE 1275W. DONEGAN AVE. #A KISSIMMEE, FL. 34741
	1275W. DONEGAN AVE. #A
	KISSI MIMER, FL. 34741
(Use attachment if necessary)	
NOTE: An additional article must	be added if an effective date is requested.
REQUIRED SIGNATURE:	
	P. O'neill
	ber or an authorized representative of a member.
(In accordance with s of this document con that the facts stated h	section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury serein are true.)

Filing Fees:

JESUS P, OWEI'LL
Typed or printed name of signee

\$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)