

W04000060106

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.

((H04000166014 3)))

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

RECEIVED

04 AUG 12 PM 3:19

DIVISION OF CORPORATIONS

Division of Corporations
Fax Number : (850) 205-0383

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

LIMITED LIABILITY COMPANY MORNINGSIDE ENTERTAINMENT, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 AUG 12 AM 9:45

FILED

Electronic Filing Menu

Corporate Filing

Public Access Help

W04-600104
DL

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

Morningside 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:

616 W 51st

same

South Beach, FL

33140

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

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

I. S. Schmeer

Name

616 W 51st Street

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

South Beach Florida 33140

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 AUG 12 AM 9:45

FILED

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

T. S. Schmeer
616 W. 51st Street
MB, FL 33140

MGRM

Tom Schmeer
616 W 51st Street
MB, FL 33140

MGRM

Marie Dileo
616 W 51st Street
MB, FL 33140

MGRM

Constance Boyd
616 W 51st Street
MB, FL 33140

(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 606.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Barry Schmeer

Typed or printed name of signer

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 AUG 12 AM 9:45

FILED