

W40000 60200

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

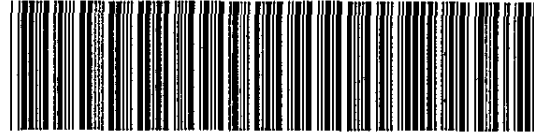
(Business Entity Name)

(Document Number)

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WS 1ST ENTERTAINMENT GROUP, LLC

P. O. BOX 53
WHITE SPRINGS, FL. 32096
Phone (386) 397-2948 OR 961-8578

August 4, 2004

FLORIDA DEPARTMENT OF STATE
REGISTRATION SECTION
DIVISION OF CORPORATIONS
P. O BOX 6327
TALLAHASSEE, FL 32314

Gentlemen,

This cover letter is submitted on behalf of WS 1ST ENTERTAINMENT GROUP , LLC with the Articles of Organization to form a Limited Liability Company. This is a for profit company. The principal activity is Entertainment and Arts -- Recording company and Promotions.

The business consist of two joint venture. Agreement made between Amber Meshon Robinson (60%) and Shaquenia Z. Russ (40%) who will share profits and losses until initial investment of \$3,000.00 have been recouped. Then, the percentage shall become 50/50.

The registered agent is Ms. Amber Meshon Robinson.

The present address is listed as: 16394 Diamond Street
White Springs, FL 32096

Telephone Number for Registered Agent is (386) 397-2948 or 397-9332

EIN { Applied for. SSN for Registered Agent is #589-64-7476

Please find enclosed the Articles of Organization for WS 1ST ENTERTAINMENT GROUP, LLC and a check for \$130.00 for the following fees:

\$100.00	Filing Fee for Artilcles of Organization
25.00	Registration of Registered Agent
<u>5.00</u>	Certificate of Status
\$130.00	

AMR/SZR:mdf

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

WS 1ST ENTERTAINMENT GROUP, LLC

ARTICLE II - Address:

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

P.O. BOX 53, WHITE SPRINGS, FL 32096

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

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

AMBER MESHON ROBINSON
Name
16394 DIAMOND STREET
Florida street address (P.O. Box **NOT** acceptable)
WHITE SPRINGS, FL 32096
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, F.S..

Amber M. Robinson
Registered Agent's Signature

Article IV - Management (Check box if applicable.)

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Amber Meshon Robinson
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.)

AMBER MESHON ROBINSON
Typed or printed name of signee

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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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