

Aug 23 04 01:33p

RI

3056752811

W4000042394

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.

((H04000171914 3)))

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

To:

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

From:

Account Name : A 1 A CORPORATE SERVICES, INC.  
Account Number : I20010000247  
Phone : (877) 527-3463  
Fax Number : (305) 675-2811

RECEIVED

04 AUG 23 PM 12:43

DIVISION OF CORPORATION

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

04 AUG 23 AM 9:33

FILED

**LIMITED LIABILITY COMPANY**

**BODHICITTA PRESENTS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

W4-62394  
JR

H040001719143

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

**In compliance with Chapter 608, F.S.**

**ARTICLE I NAME**

The name of the Limited Liability Company is:  
BODHICITTA PRESENTS LLC

**ARTICLE II ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is:  
27223 Overseas Hwy  
Ramrod Key, FL 33042-5344

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE**

The name and the Florida street address of the registered agent are:  
DR. CAROLYN GILLMAN  
27223 Overseas Hwy  
Ramrod Key, FL 33042-5344

Having been named as registered agent 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..

04 AUG 23 2004 9:33 AM  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

  
DR. CAROLYN GILLMAN / Registered Agent's

**ARTICLE IV MANAGEMENT**

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

H040001719143

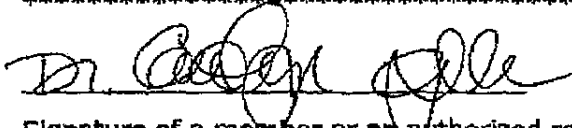
H040001719143

Page 2 BODHICITTA PRESENTS LLC

ARTICLE V MEMBERS (optional)

MANAGING MEMBER:  
DR. CAROLYN GILLMAN  
27223 Overseas Hwy  
Summerland Key, FL 33042-5344

\*\*\*\*\*



Signature of a member or an authorized representative of a  
(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.

DR. CAROLYN GILLMAN  
Typed or printed name of signee

FILED  
04 AUG 23 AM 9:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA