

L04000065381

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

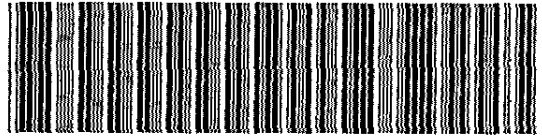
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

9/2
just



300040448943

08/30/04--01051--012 **125.00

FILED
04 AUG 30 AM 11:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

ATX1

TO: Registration Section
Division of Corporations

SUBJECT: Simple Studios, 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:

Steven Lambert
(Name of Person)

Simple Studios, LLC
(Firm/Company)

10066 Linden Place Drive
(Address)

Seminole, FL 33776
(City/State and Zip Code)

For further information concerning this matter, please call:

Steven Lambert
(Name of Person)

at 727-798-3703
(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

FILED
04 AUG 30 AM 11:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Simple Studios, LLC

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

ATX1

ARTICLE I - Name:

The name of the Limited Liability Company is:

Simple Studios, LLC

ARTICLE II - Address:

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

Principal Office Address:

Simple Studios, LLC
10066 Linden Place Drive
Seminole, FL 33776

Mailing Address:

Simple Studios, LLC
10066 Linden Place Drive
Seminole, FL 33776

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

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

Steven Lambert

Name

10066 Linden Place Drive

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

Seminole

FLORIDA 33776

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

FILED
04 AUG 30 AM 11:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Simple Studios, LLC

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

ATX1

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Steven Lambert

10066 Linden Place Drive

Seminole, FL 33776

Member

Randy Lyons

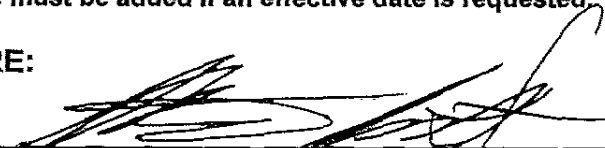
28977 Old Trilby Road

Brooksville, FL 34602

(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 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.)

Steven Lambert

Typed or printed name of signee

FILED
04 AUG 30 AM 11:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)