

W04000077957

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

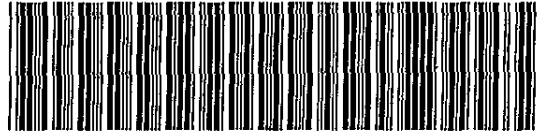
Certificates of Status _____

Special Instructions to Filing Officer:

10/25

FLUC

Office Use Only



900041555209

10/25/04--01027--014 **130.00

MJH

FILED

04 OCT 25 AM 9:37

**SEAL OF THE STATE
TALLAHASSEE, FLORIDA**

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RED ENTERTAINMENT GROUP, 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:

ANNELIESE PANDIELLA
(Name of Person)

(Firm/Company)

801 BRICKELL BAY DR. STE. 564
(Address)

MIAMI, FL. 33131
(City/State and Zip Code)

For further information concerning this matter, please call:

ANNELIESE PANDIELLA at (786) 290-9066
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input checked="" type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|---|---|

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

RED ENTERTAINMENT GROUP, LLC.

ARTICLE II - Address:

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

Principal Office Address:

801 BRICKELL BAY DR, STE. 564
MIAMI, FL. 33131

Mailing Address:

801 BRICKELL BAY DR. STE. 564
MIAMI, FL. 33131

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

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

ANNELIESE PANDIELLA

Name

801 BRICKELL BAY DR. STE. 564

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

MIAMI, FL 33131

FL

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..


Registered Agent's Signature

(CONTINUED)

FILED
04 OCT 25 AM 9:37
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

ANNELIESE PANDIELLA

801 BRICKELL BAY DR. STE. 564

MIAMI, FL. 33131

MGRM

CARLOS PANDIELLA

801 BRICKELL BAY DR, STE., 564

MIAMI, FL. 33131

MGRM

RAMON EMILIO ORTIZ

716 MICHIGAN AVE. APT. 305

MIAMI BEACH, FL. 33139

N/A

N/A

(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.)

ANNELIESE PANDIELLA

Typed or printed name of signee

Filing Fees:

**\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent**

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)