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Florida Department of State
Division of Corporations
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2004 DEC -6 P 12:38

Electronic Filing Cover Sheet

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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To:

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

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

RECEIVED
04 DEC -6 PM 1:05
DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

john roddy productions llc

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY 12:38

ARTICLE I - Name:

The name of the Limited Liability Company is:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JOHN RODDY PRODUCTIONS L L C

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

20876 San Simeon Way

Unit # 58

Miami, FL 33179

549 Sawgrass Corporate Parkway

SUNRISE FL 33325

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

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

Juan Carlos Ricatti

Name

549 Sawgrass Corporate Parkway

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

SUNRISE FL 33325

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.

[Signature]
Registered Agent's Signature

(CONTINUED)

Page 1 of 2

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

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

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Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

2004 DEC -6 P 12:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDAMGRDenny S. Ricatti1561 EASTLAKE WAYWESTON FL 33324

(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.)

Jana Carlos Ricatti

Typed or printed name of signer

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)

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