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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)205-0383

From:
Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 075350000353
Phone : (212) 431-5000
Fax Number : (212) 431-1441

05 JAN 28 PM 3:19
DIVISION OF CORPORATIONS

LIMITED LIABILITY COMPANY

Super Showtime Multicultural Festival LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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2005 JAN 27 A 9:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

Super Showtime Multicultural Festival LLC

ARTICLE II - Address:

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

Principal Office Address:

1000 Broward Road #504

Jacksonville FL 32218

Mailing Address:

1000 Broward Road #504

Jacksonville FL 32218

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

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

Voncier M. Alexander

Name

1000 Broward Road #504

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

Jacksonville

FLORIDA 32218

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.

Voncier M. Alexander

Registered Agent's Signature

1-26-05

SECRETARY
TALLAHASSEE
2005 JAN 28
07

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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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Voncier M. Alexander

1000 Broward Road # 504

Jacksonville FL 32218

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Voncier M. Alexander

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.)

Voncier M. Alexander, MEMBER

Typed or printed name of signer

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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)

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