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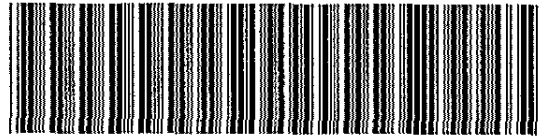
(Business Entity Name)

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TALLAHASSEE, FL 32301

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## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: DYNAMIX RECORDS, L.L.C.  
(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:

MATTHEW A. DAVIS  
(Name of Person)

DYNAMIX RECORDS, L.L.C.  
(Firm/Company)

1205 MARIPOSA AVE, #212  
(Address)

CORAL GABLES, FL 33146  
(City/State and Zip Code)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

MATTHEW A. DAVIS at (305) 1609-1499  
(Name of Person) (Area Code & Daytime Telephone Number)  
cell (839) 634-1012

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)    ☒ \$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

PLEASE MAKE EFFECTIVE DATE MARCH 7, 2005  
IF POSSIBLE.

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

DYNAMIX RECORDS, 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:

1205 MARIPOSA AVE #212  
CORAL GABLES, FL 33146

SAME

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

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

MATTHEW A. DAVIS  
Name  
1205 MARIPOSA AVE, #212  
Florida street address (P.O. Box NOT acceptable)  
CORAL GABLES FL 33146  
City, State, and Zip

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ALL INFORMATION CONTAINED  
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*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..*

Matthew A. Davis  
Registered Agent's Signature

(CONTINUED)

**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

MATTHEW A. DAVIS  
1805 MARIPOSA AVE #212  
CORAL GABLES, FL 33146

\_\_\_\_\_

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(Use attachment if necessary)

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

**REQUIRED SIGNATURE:**

Matthew A. Davis

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.)

*Note: Please make effective date March 7, 2005 if possible.*

MATTHEW A. DAVIS

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)**

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TALLAHASSEE, FL

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