

L05000025844

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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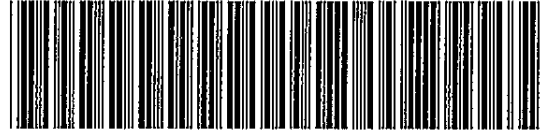
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NEW WORLD RADIO BROADCAST 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:

PIERRE JOMANE JEAN
(Name of Person)

RADIO STATION.
(Firm/Company)

3700 GEORGIA AVENUE Suite 5
(Address)

WEST PALM BEACH, FL 33405
(City/State and Zip Code)

For further information concerning this matter, please call:

PIERRE JOMANE JEAN at 786 290-2397
(Name of Person) (Area Code & Daytime Telephone Number)

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

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FLORIDA
WOS

Card, Address -

P.O. Box 600922
North Miami Beach
Florida 33160 -

Name on the card

Pierre J. Jean

Card numbers:

Payable to: Florida Department of State:

\$ 160-00-

VISA EXP. DATE

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TALLAHASSEE FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

March 4, 2005

PIERRE JOMANE JEAN
RADIO STATION
3700 GEORGIA AVENUE SUITE 5
WEST PALM BEACH, FL 33405

SUBJECT: NEW WORLD RADIO BROADCAST L.L.C.
Ref. Number: W05000011397

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TALLAHASSEE FLORIDA

We have received your document for NEW WORLD RADIO BROADCAST L.L.C., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$125.00.

We are not able to use credit card numbers for this filing, and we have removed the number from your cover letter.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers
Document Specialist

Letter Number: 505A00015221

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

NEW WORLD RADIO BROADCAST LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

3700 GEORGIA AVE
SUITE 5
WEST P. BEACH FL 33405

3700 GEORGIA AVE
SUITE 5 WEST
PALM BEACH, FL 33405

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

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

RACHELLE GEFERARD
Name

1505 CRESCENT CIRCLE #22

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

WEST P. BEACH FL 33403-

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..

Rachelle Geferard
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:

MGRM.

PIERRE JOMANE JEAN
3700 GEORGIA AVENUE
SUITE 5 W.P.B. FL 33405

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TALLAHASSEE FLORIDA

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

Pierre Jomane Jean
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.)

PIERRE JOMANE JEAN.
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)