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(Requestor's Name)	-	
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PICK-UP WAIT MAIL		4
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Certified Copies Certificates of Status	- ni	, <del>-</del>
Special Instructions to Filing Officer:	]	.:
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April 11, 2005

Registration Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

## RE: Groove Nirvana Productions, LLC – Articles of Organization

Dear Sir or Madam:

Enclosed please find the Articles of Organization for the abovenamed entity. I understand the fees to organize the LLC, with the return of a certified copy, will be \$155.00, therefore I have enclosed our check number 2513 to cover all costs.

Once filed, please return the certified & final evidence to me at:

SABC Lori E. Kolin 101 Main Street, Suite One Tappan, NY 10983

If you should have any questions, or if I can assist in any way, please call me at 1.888.664.6263, ext. 21.

Thank you!

Best Regards

Lori E. Kolim

Corporate Specialist

#### TRANSMITTAL LETTER

	gistration Section vision of Corporations
SUBJECT:	Groove Nirvana Productions, LLC
	(Name of Limited Liability Company)
The enclosed	d Articles of Organization and fee(s) are submitted for filing.
	Please return all correspondence concerning this matter to the following:
	Lori Kolin
	(Name of Person)
	Start A Business.com, Inc.
	(Firm/Company)
	101 Main Street, Suite One
<del></del>	(Address)
	Tappan, NY 10983
	(City/State and Zip Code)
For further in	nformation concerning this matter, please call:
Lori E. Kolii	at ( 888 ) 664.6263
	(Name of Person) (Area Code & Daytime Telephone Number)

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

Groove Nirvana F	Productions, LLC	
ARTICLE II -		of the principal office of the Limited Liability Company is
Principal Office	e Address:	Mailing Address:
5745 SW 46th Te	rrace	5745 SW 46th Terrace
Miami, Florida 33	s <b>1</b> 55	Miami, Florida 33155
Marin, 7 torida oc		
Wilderin, 7 torrida Go		
ARTICLE III -		ristered Office, & Registered Agent's Signature: of the registered agent are:
ARTICLE III -		, , , , , ,
ARTICLE III -	e Florida street address	, , , , , ,
ARTICLE III -	e Florida street address	of the registered agent are:
ARTICLE III -	Mabel Basterrechea  5745 SW 46th Terrace	of the registered agent are:
ARTICLE III -	Mabel Basterrechea  5745 SW 46th Terrace	of the registered agent are:  Name

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.

Travio

Mabel Basterrechea

By:

Page 1 of 2 (CONTINUED)

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	Claudius Peter Regal 5745 SW 46th Terrace Miami, Florida 33155	
(Use attachment if necessary)		
NOTE: An additional article must be	added if an effective date is reques	sted.
REQUIRED SIGNATURE:  Signature of a member or an au	ithorized representative of a member.	
(In accordance with section 608.4	108(3); Florida Statutes, the execution Tirmation under the penalties of perjury	

#### 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)

Typed or printed name of signee