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STATE OF GEORGIA
COUNTY OF GWINNETT

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: One on One Entertainment, 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:

M. Scott Leonard, Esq.
(Name of Person)

M. Scott Leonard, P.A.
(Firm/Company)

150 W. Flagler Street, Suite 2850
(Address)

Miami, Florida, 33130
(City/State and Zip Code)

For further information concerning this matter, please call:

M. Scott Leonard at (786) 425-2070
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

In Compliance with Florida Statutes Chapter 608

ARTICLE I NAME

The name of the Limited Liability Company is:

One on One Entertainment, LLC

ARTICLE II ADDRESS

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

Principal Office Address:

319 W. 28th Street
Suite 17
Miami Beach, FL 33140

Mailing Address:


319 W. 28th Street
Suite 17
Miami Beach, FL 33140

**ARTICLE III REGISTERED AGENT, &
REGISTERED AGENT'S SIGNATURE**

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

M. Scott Leonard, P.A.
150 W. Flagler Street,
Penthouse- Suite 2850
Miami, Florida, 33130

Having been named as registered agent and to accept service of process for the above 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..



Registered Agent's Signature

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV MANAGING MEMBERS

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

<u>Title:</u>	<u>Name and Address</u>
MGRM	Alejandro Fenice 319 W. 28 th Street, Suite 17 Miami Beach, FL 33140

ARTICLE V EFFECTIVE DATE

The effective date of these Articles of Organization shall be:

April 15, 2005

REQUIRED SIGNATURE:

	04/15/2005
Signature of a member or authorized representative of a member	Date

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true).

ALEJANDRO FENICE

Typed or Printed Name of Signee

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CLERK OF STATE
OF FLORIDA