# 1.05000067416

(Requestor's Name)  (Address)  (Address)	100056992351
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)	07/05/8501058002 **125.00
Certified Copies Certificates of Status  Special Instructions to Filing Officer:	

Office Use Only

### TRANSMITTAL LETTER

FILED

TO: Registration Section	, ILCU		
70 C C C C C C C C C C C C C C C C C C C	2005 1111		
SUBJECT: Lifewarks Entertainment (Name of Limited Liability Company)	SECRET OF STATE		
The enclosed Articles of Organization and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Ira Marcus, Esq.  (Name of Person)			
Ira Marcus, P.A. (Firm/Company)			
1313 S. Andrews Avenue	···		
Fort Lawderdale FL 33316 (City/State and Zip Code)			
For further information concerning this matter, please call:			
Tra Marcus at 954, 523- (Name of Person) (Area Code & Daytime Tele	9696		
(Name of Person) (Area Code & Daytime Tele	phone Number)		
Enclosed is a check for the following amount:			
Certificate of Status 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

### FILED

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY **ARTICLE I - Name:** The name of the Limited Liability Company is: ite Works Entertainment. **ARTICLE II - Address:** The mailing address and street address of the principal office of the Limited Liability Company is: **Principal Office Address:** Mailing Address: ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: Ira Marcus, Esq. Name 1313 S. Andrews Avenue Florida street address (P.O. Box NOT acceptable) Fort Lauderdale FL 33316 City, State, and Zip Having been named as registered agant, 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..

(CONTINUED)

ARTICLE IV- Manager(s) or Managi The name and address of each Manager		
_	-	FILED
Title: "MGR" = Manager	Name and Address:	2005 JUL -5 ₱ 1:23
"MGRM" = Managing Member		SECRETARY
MGRM	Albert / Viniaci)	SECRETARY OF STATE TALLAHASSEE. FLORIDA
	//// 3.00. 3. //0	33069
MGRM	Bentriz Montaci	<u>.</u>
***	1411 5.10. 31 ST Au	<u> </u>
	Pompring Beach, +	1a. 33069
		· · · · · · · · · · · · · · · · · · ·
		• • • • • • • • • • • • • • • • • • • •
· · · · · · · · · · · · · · · · · · ·		
(Use attachment if necessary)		
NOTE: An additional article must be	e added if an effective date is reques	sted.
REQUIRED SIGNATURE:		
		ind
d nauces	as Olu Movitop Represen	Adria.
Signature of a member of	or an authorized representative of a memb	er. Wheet
In accordance with section of this document constitution	on 608.408(3), Florida Statutes, the execution tes an affirmation under the penalties of perju	John By Bert acce
that the facts stated here	ein are true.)	•
Iran	1 ARCUS d or printed name of signee	
1 ype	d or printed hame or 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)