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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Organik Rennis	ecordings, L	LC
The enclosed Articles of Organization and fee(s) are	submitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
Federico M.	Gouzalez (Name of Person)	
		2005 JUL 1
	(Firm/Company)	至月五
532 8th A	ve U.	LED 11 PH 1:12 ASSEE, FLORIDA
	(Address)	
Saint Petersb	ure, FL 3370 y/State and Zip Code)	ANDA'S
For further information concerning this matter, please	e call:	
Foderico M. Gonzalez (Name of Person)	_at (727 <u>492</u> – (Area Code & Daytime T	1439 Telephone Number)
Enclosed is a check for the following amount:		
□ \$125.00 Filing Fee □ \$130.00 Filing Fee & Certificate of Status	2 \$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	MAILING A Registration S	

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:
Organik Recordings, 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: Feden'co M. Gouzalez
Federico M. Gonzalez 532 Ath Ave N. 532 Ath Ave North Soint Petersburg, FL 33701 Saint Petersburg, FL 33701 Michael coursy
914 NW 13-44 AVE ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (41NEJ VI WE) FC 3260)
The name and the Florida street address of the registered agent are:
Federico M Gonzalez Name
532 8th Ave U. Florida street address (P.O. Box NOT acceptable)
Salut Petershors, FL 33701 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
Registered Agent's Signature

(CONTINUED)

Mike colby

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	Mike Colby 914 NW 13th Ave Gainesviller FL 32601
MGR	Federico M. Gonzalez 530 8th Ave D. Soint Petershurg, FL 33701
(Use attachment if necessary)	- 12 000000000000000000000000000000000000

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

REQUIRED SIGNATURE:

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 regulties of periors.

of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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)