L05000072863

Matocha Wooten (Requestor's Name)				
(Address) 17835 NW 0744 C+ (Address) (Address) (Address) (Address) (Address) (Address) (Address) (Address) (Address)				
PICK-UP	□ wA	ЧТ	MAIL	
(Business Entity Name)				
(Document Number)				
Certified Copies	Certi	ificates o	f Status	
Special Instructions to	Filing Offic	er;		
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Acknowledgement	DCC			
W. P. Verifyer	DCC			



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PERCENCY OF SECTION

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	is:		
305 Artist&Talent Management,	LLC		
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liability Compa	any is:	
Principal Office Address:	Mailing Address:		
17835 NW 27th Court	17835 Nw 27th Court		
Miami,FL 33056	Miami,FL 33056		
ARTICLE III - Registered Agent, Register	red Office, & Registered Agent's Signature:		
The name and the Florida street address of th	e registered agent are:		
Chim Natasha Wooten			
Na	me		
17835 NW 27th Court			
Florida street	address (P.O. Box NOT acceptable)		
Miami	FL 33056		
City, Stat	le, and Zip		
liability company at the place designated in registered agent and agree to act in this capa statutes relating to the proper and complete	to accept service of process for the above stated in this certificate, I hereby accept the appointmentity. I further agree to comply with the provision performance of my duties, and I am familiar with egistered agent as provided for in Chapter 608, F	nt as ns of all h and	
Chim Natasha Wooten	ZECRI SECRI ALLAI	FZ	
Registered Age	RY OF STATE		
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Page 1 of 2			

ARTICLE IV- Manager(s) or Managing Me	ember(s)	
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The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR/MGRM	Chim Natasha Wooten
	17835 Nw 27th Court
	Miami FL 33056
MGR/MGRM	Johnson Jules
	17835 NW 27th Court
	Miami,FL 33056
(Use attachment if necessary) NOTE: An additional article must b	ne added if an effective date is requested.
REQUIRED SIGNATURE:	Jon J
Signature of a member	or an authorized representative of a member.
(In accordance with sect of this document constitute that the facts stated he	ion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury trein are true.)
	ed or printed name of signee
Тур	ed of britted 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)

SECRETARY OF STARE

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