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LIMITED LIABILITY COMPANY

Troy McCarty Studios LLC

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Florida Dept of State  
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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

September 7, 2005

TROY MCCARTY STUDIOS LLC  
18103 DETROIT AVENUE  
LAKEWOOD, OH 44107

SUBJECT: TROY MCCARTY STUDIOS LLC  
REF: W05000041389

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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Thank You!  
Connie

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:

Troy McCarty Studios LLC

## ARTICLE II - Address:

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

Principal Office Address:

18103 Detroit Avenue

Lakewood, OH 44107

Mailing Address:

18103 Detroit Avenue

Lakewood, OH 44107

## ARTICLE III - Registered Agent, Registered Office, &amp; Registered Agent's Signature:

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

CT Corporation System

Name

1200 South Pine Island Road

Florida street address (P.O. Box NOT acceptable)

Plantation, Florida 33324

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..*

CT Corporation System

[Signature]  
Registered Agent's Signature

JOYCE A. GILBERT  
ASSISTANT SECRETARY

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TALLAHASSEE, FLORIDA

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**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

Troy McCarty

15541 Brewster

East Cleveland, OH 44114

(Use attachment if necessary)

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

**REQUIRED SIGNATURE:**

*Troy McCarty president.* and Managing Member  
 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 penalties of perjury that the facts stated herein are true.)

*Troy McCarty.*

Typed or printed name of signer

**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)

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