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(Re	questor's Name)	
(Ad	dress)	_
(Ad	dress)	
(Cit	y/State/Zip/Phone	e#)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
• -	_	-
		
Special Instructions to	Filing Officer:	
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TRANSMITTAL LETTER

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

SUBJECT: BLUEPRINT MEDIA LLC

(Proposed limited liability company name - must include suffix)

Enclosed is an original and one (1) copy.

Filing fee for articles of organization of Florida Limited Liability Company:

\$100.00 Filing fee for Articles of Organization \$25.00 Designation of Registered Agent

A letter of acknowledgement will be issued free of charge upon filing. Please submit an additional \$5 if a certificate of status is needed. The fee for a certified copy is \$30. Please send one check for the total amount made payable to the Florida Department of State.

FROM: MELANIE REILLY

Name (Printed or typed)

965) RISGE RUNNER CT

Address

ESTENO FL 33928

City, State & Zip

239 948 5616

Daytime Telephone number

. *	ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY CON	IPANY
ember, stated	ARTICLE I - Name: The name of the Limited Liability Company is: BLUEPRINT MEDIA	1 LLC
rior to	ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Com 9651 RIDGE RUNNER CT ESTERD, FLORIDA 33928 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature	
	The name and the Florida street address of the registered agent are:	
	MELANIE REILLY	
made	9651 RIDGE RUNNER CT	
ate or	Florida street address (P.O. Box NOT acceptable)	
	ESTEYLO FL 33928 City, State, and Zip	
with	City, State, and Zip	
	Having been named as registered agent and to accept service of process for the above state liability company at the place designated in this certificate, I hereby accept the appointmen registered agent and agree to act in this capacity. I further agree to comply with the provis statutes relating to the proper and complete performance of my duties, and I am familiar w accept the obligations of my position as registered agent as provided for in Chapter 608, F	nt as sions of all rith and
0) I	Article IV - Management (Check box if applicable.) The Limited Liability Company is to be managed by one manager or more managers therefore, a manager - managed company.	s and is,
	(An additional article must be added if an effective date is requested)	
1	trane July	
	Signature of a member or an authorized representative of a member.	05.0
	(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.)	5 SEP 29
	SHANE REILLY	
! a .	Typed or printed name of signee	က 😤

Filing Fees:
\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)