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	None None			
(не	questor's Name)			
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PICK-UP	MAIT	MAIL		
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AFFECTIVE DATE

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COVER LETTER

TO:	Registration Se Division of Co			
SUBJE	ECT:	600 Seeo	FILMS LL	C
		(Name of Limite	d Liability Company)	
The en	closed Articles o	f Organization and fee(s) are s	ubmitted for filing.	
Please	return all corresp	ondence concerning this matte	er to the following:	
	<u></u>	MIGUE	2 A. FERREN	2
			Name of Person)	
		600.	(PEED FILMS	LLC
		(Firm/Company)	
,	·	857	7 Sw. 137	AVENUE
		115	(Address)	_
		MAMI	1 133/8	3
·		(City,	/State and Zip Code)	
For fur	ther information	concerning this matter, please	call;	
	MIGUEL	FERRER	at (786, 281-	9500
	(Name	of Person)	(Area Code & Daytime Te	lephone Number)
Enclos	ed is a check fo	or the following amount:		
]\$125	.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	us.



February 2, 2006

MIGUEL A FERRER 8577 SW 137 AVENUE MIAMI, FL 33183

SUBJECT: GOD SPEED FILMS LLC Ref. Number: W06000005319

We have received your document for GOD SPEED FILMS LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date is not acceptable since it is not within five working days of the date of receipt.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Letter Number: 906A00007713

Neysa Culligan Document Specialist

SFFECTIVE DATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
600 Speep Films	UC
Must end with the words "Limited Liability Company, "Limite	
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
8577 SW 137th ave Hami, Fl 33183	Same
Florida street add	egistered agent are: Funce U 137th ave ress (P.O. Box NOT acceptable) FL 33183

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 (REQUIRED)

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	Miguel A. Ferrer 8577 SW 137th are Miami, Fl 33183
	
 	T 7
(Use attachment if necessary) ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must b to or 90 days after the date of filing.)	e date of filing: $\frac{2/17/06}{0}$ (OPTIONAL) se specific and cannot be more than five business days prior
REQUIRED SIGNATURE. Signature of a member	er or an authorized representative of a member.
of this document const that the facts stated h	

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)