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COVER LETTER

TO:	Registration Solution of Co			
SUBJI	ecr:	eff Bachstein (Name of Limite	LLC	
		(Name of Limite	d Liability Company)	
The en	closed Articles o	of Organization and fee(s) are s	ubmitted for filing.	
Please	return all correst	ondence concerning this matte	r to the following:	
		Jeffrey Back	stein	
		Jeffrey Back	Name of Person)	
		· · · · · · · · · · · · · · · · · · ·	Firm/Company)	
(Film/Company)				
Palm Havbor, FL 34683 (City/State and Zip Code)				
			(Address)	<u>,, , , , , , , , , , , , , , , , , , ,</u>
	5			
		m Harbor, F	L 34683	
		(Cny.	State and Lip Code)	
Von Gu	than information	agreeming this matter places	anii.	
roriu	dici intomadon	concerning this matter, please	can.	
7	- CC I	Sachelein	at 727 \ 420-	7081a
	(Name	e of Person)	at (727) 420- (Area Code & Daytime To	elephone Number)
Enclos	sed is a check fo	or the following amount:		
] \$125	0.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155,00 Filing Fee & Certified Copy	\$160.00 Filing Fee, Certificate of Status &
			(additional copy is enclosed)	Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section	Street/Courier Addres Registration Section	<u>\$</u>
		Division of Corporations	Division of Corporation	ns
		P.O. Box 6327	Clifton Building	
		Tallahassec, FL 32314	2661 Executive Center Tallahassee, FL 32301	Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Jeff Bachstein LLC
(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
262 Arbor Dr. E 262 Arbor Dr. E Palm Harbor, FL 34683 Palm Harbor, FL 34683
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
Jeffrey Bachstein Name
202 Arbor Dr. E
Florida street address (P.O. Box NOT acceptable)
Palm Harbor FL 34683 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.

(CONTINUED)
Page 1 of 2

ed Agent's Signature (REQUIRED)

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 MGR (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: _ (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** r 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.) Typed or printed name of signee

Filing Fees:

S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
S 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)