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(Re	questor's Name)			
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COVER LETTER

	ion Section of Corporations		
SUBJECT:	Jukebox LLC		
SUBJECT:		d Liability Company)	· · · · · · · · · · · · · · · · · · ·
The enclosed Arti	cles of Organization and fee(s) are s	submitted for filing.	
	orrespondence concerning this matte		
100	ebox, LLC		0 2
	ĺ	Name of Person)	P. S.
Juk	ebox, LLC		高
		(Firm/Company)	255
80	31 Abbott Ave	2 Apt. 17	T
			OR S
Mi	ami Beach,	fr 33141	I PO
	(Cit)	//State and Zip Code)	F
For further inform	ation concerning this matter, please	cali:	
Irene	Kravitz (Name of Person)	#1786 , SI4. L	1521
	(Name of Person)	(Area Code & Daytime To	elephone Number)
Enclosed is a che	eck for the following amount:		
\$125.00 Filing	Fee \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 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	ris

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
Jukebox, LLC	
(Must end with the words "Limited Liability Company, "Limited C	ompany" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the prince	ipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
RO31 Abboit Are #17 Niam: Beach Fi 331111 ARTICLE III - Registered Agent, Registered Of (The Limited Liability Company cannot serve as its own Registered	
business entity with an active Florida registration.)	
The name and the Florida street address of the reg	istered agent are:
Ivene Kracitz	
Name	是 第二
8031 Abbott Hv Florida street addres	s (P.O. Box NOT acceptable)
Miam: Beach r City, State, and	1 33141 FLORING 56
Having been named as registered agent and to accept the obligations of my position as registered accept the obligations of my position as registered.	ept service of process for the above stated limited certificate, I hereby accept the appointment as I further agree to comply with the provisions of all rmance of my duties, and I am familiar with and

(CONTINUED)
Page 1 of 2

Registered 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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
rene kravitz	8031 Abbott Are #17 Miami Beach 11 33141
	2 Paris
(Use attachment if necessary)	
	date of filing: date of filing (OPTIONAL) e specific and cannot be more than five business days prior
DECHIDER SIGNATURE.	

KEUUIKED SIGNATURE:

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.)

Irene Kravitz

Typed or printed 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)