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# **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT: BRUSH PARK STUDIO	L.L.C.
(Name of Limited Liability Con	mpany)
The enclosed Articles of Organization and fee(s) are submitted for fi	iling.
Please return all correspondence concerning this matter to the follow	/ing:
JAMES RENDERS (Name of Person	
(Name of Person	
BRUSH PARK STUDIO (Firm/Company	₩ <
(Firm/Company	) <del>ž</del> Š
17 NE 7th Street	-7 F
(Address)	
	oda 33444 <b>8</b> 90
DELRAY BEACH, FLOR	IDA 33444 8 #
(City/State and Zip C	Code)
For further information concerning this matter, please call:	
JAMES Renberg at (561 (Name of Person) (Area	302-1033
(Name of Person) (Area	Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \$\bigcup \\$155.00 Certificate of Status Certified C (additional contents)	
Registration Section Regis Division of Corporations Divis P.O. Box 6327 Clifto Tallahassee, FL 32314 2661	tt/Courier Address Stration Section Sion of Corporations On Building Executive Center Circle thassee, FL 32301

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limit	ted Liability Comp	oany is:				
BRUSH	PARK S	TUD10	L.L.C	•		
(Must end with the words "Li	mited Liability Compan	y, "Limited Co	mpany" or their abbre	eviation "LLC," or	"L.C.,")	. '
ARTICLE II - Addre The mailing address a		of the princi	pal office of the	Limited Liabi	lity Compa	any is:
Principal Office Add	ress:	<u>M</u>	ailing Address:	<u>.</u>		
17 NE 7th DELRAY BE	Street SACH, FLOZI 33444	<u>D</u> A _	DELRAY	h Street Beach,	Flori 3444	DA.
ARTICLE III - Regis (The Limited Liability Compusiness entity with an activ	any cannot serve as its o					
The name and the Flor	rida street address	of the regis	tered agent are:		201	NO
	JAMES	Renbe	RLA		2006 APR	SECRE VISION
: -	17 NE 7th	Stree	(P.O. Box NOT ac		-7 PH	TARY OF OF CORPC

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	
MGR	JAMES RENDERLY 17 NE 7th Street DETRAY BEACH, IEL 33444
MGRM	THOMAS ATKINSON  1135 BIRCHWOOD RUAD  SOUTH HAVEN, MI 49090
· · · · · · · · · · · · · · · · · · ·	APR - 7
i vice in the second of the se	PM 5:30
(Use attachment if necessary)	

ARTICLE V: Effective date, if other than the date of filing: APRIL 3 - 2006. (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:

(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.)

### 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)