

L06000041024

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

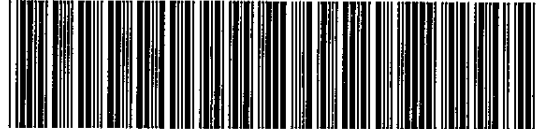
Certified Copies _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEPARTMENT OF STATE
ACCOUNT FILING COVER SHEET

Account Number FCA000000017

Reference:
(Sub Account)

Date:

4/20/06

Requestor Name: Carlton Fields

Address: Post Office Drawer 190
Tallahassee, Florida 32302

Telephone: (850) 224-1585

Contact Name: Kim Pullen, CLA (ext. 5261)

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TALLAHASSEE, FLORIDA

Corporation Name:

Mother May I Records, LLC

Entity Number:

Authorization:

Kim Pullen

☒ AZHCLK
Certified Copy

☒ New Filings

☐ Fictitious Name

☒ Certificate of Status

☐ Plain Stamped Copy

☐ Amendments

☐ Annual Report

☐ Registration

(X) Call When Ready

(X) Call if Problem

() After 4:30

(X) Walk In

() Will Wait

(X) Pick Up

CF Internal Use Only

Client: 34292 Matter: 28386

Name: Linda Bivens Office: TPA

**ARTICLES OF ORGANIZATION
OF
MOTHER MAY I RECORDS, LLC**

The undersigned, acting as the authorized representative of the organizing member of a limited liability company under the Florida Limited Liability Company Act, adopts the following Articles of Organization for such limited liability company (the "Company"):

**ARTICLE I
Name**

The name of the Company is Mother May I Records, LLC.

**ARTICLE II
Initial Principal Office Street and Mailing Address**

The Company's initial principal office street and mailing address is 17001 Madres De Avila, Tampa, Florida 33613.

**ARTICLE III
Initial Registered Agent and Office**

The street address of the initial registered office of the Company is 17001 Madres De Avila, Tampa, Florida 33613, and the name of its initial registered agent at that address is Stephen R. Whitescarver.

**ARTICLE IV
Organizing Member**

The name and address of the organizing member of the Company are:

<u>Name</u>	<u>Address</u>
Michael E. Tubbs	1115 N.E. 6th Street Gainesville, Florida 32601-4466

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ARTICLE V
Authorized Representative

The name and address of the authorized representative of the organizing member of the Company are:

Name
Stephen R. Whitescarver

Address
17001 Madres De Avila
Tampa, Florida, 33613

Dated this 19th day of April, 2006.



Stephen R. Whitescarver
Authorized Representative

ACCEPTANCE BY REGISTERED AGENT

Having been named as registered agent and to accept service of process for the Company, at the place designated as the registered office, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with and accepts the duties and obligations of its position as registered agent.

Dated this 19th day of April, 2006.

REGISTERED AGENT:



Stephen R. Whitescarver