

L06000046778

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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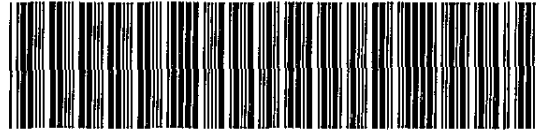
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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06 MAY -5 AM 11:53

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FLORIDA

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Latran Entertainment, LLC

Stamp Filed  
extra copies  
thanks

Signature

Requested by:

Name

Date

Time

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA
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☐ LTD Partnership File  
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☐ L.C. File  
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☐ Trade/Service Mark  
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☐ Art. of Amend. File  
☐ RA Resignation  
☐ Dissolution / Withdrawal  
☐ Annual Report / Reinstatement  
☐ Cert. Copy  
☒ Photo Copy  
☐ Certificate of Good Standing  
☐ Certificate of Status  
☐ Certificate of Fictitious Name  
☐ Corp Record Search  
☐ Officer Search  
☐ Fictitious Search  
☐ Fictitious Owner Search  
☐ Vehicle Search  
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☐ UCC 11 Search  
☐ UCC 11 Retrieval  
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE I - Name

The name of the Liability Company is:

LAFRAN Entertainment, LLC.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

6740 W. Commercial Blvd.  
Lauderhill, Florida 33319

Mailing Address:

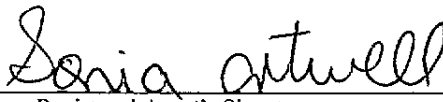
6740 W. Commercial Blvd.  
Lauderhill, Florida 33319

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Sonia M. Artwell  
6740 W. Commercial Blvd.  
Lauderhill, Florida 33319

*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

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

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

**Title:**

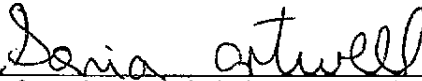
"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

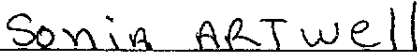
MGRM

Sonia M. Artwell  
6740 W. Commercial Blvd.  
Lauderhill, Florida 33319



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.)



Typed or printed name of signee