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## **COVER LETTER**

TO:	Registration Section Division of Corporations
SUBJE	CT: Dove VIDEO Productions, LLC. (Name of Limited Liability Company)
_	
The en	losed Articles of Organization and fee(s) are submitted for filing.
Please:	eturn all correspondence concerning this matter to the following:
	DEBRA YOUNG (Name of Person)
•	(Name of Person)
	Dove VIDEO PRODUCTIONS, L.L.C.
•	(Firm/Company)
	8525 Windy Ciacle Ba
	(Address)
_	BOUNTON Beach FL 33437 (City/State and Zin Code)
	(City/State and Zip Code)
For furt	ner information concerning this matter, please call:
J	(Name of Person) at (56/) 738-006 Y (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclos	ed is a check for the following amount:
]\$125	00 Filing Fee \$\bigcup \text{\$130.00 Filing Fee & Certified Copy (additional copy is enclosed)}\$\$ \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Control of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  Control of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
	(830) 275-603/

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

D V	Productions, L.L.C.
	ry, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of	of the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
8525 Windy Ciacle BOYNTON Beach, FL 33437	SUITE 102. WPB, FL 33405
ARTICLE III - Registered Agent, Registered Liability Company cannot serve as its obusiness entity with an active Florida registration.)	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another
The name and the Florida street address	of the registered agent are:
Debra	Young Name
	Street address (P.O. Box NOT acceptable)
BOYNTON	Beach 33437

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)

City, State, and Zip

(CONTINUED)
Page 1 of 2

DANSIER FOR DATE OF

<u> </u>	Name and Address:	
MGR	Deha a young 8525 Windy Ciacle Boynton Beach, FL 3	<u> </u>
<del></del>		<u> </u>
		_ <del>_</del>
(Use attachment if necessary)		
CLE V: Effective date, if other than the effective date is listed, the date must	he date of filing: (OP be specific and cannot be more than five busin	TIONA less day
00 days after the date of filing.)  REQUIRED SIGNATURE:		
O days after the date of filing.)  REQUIRED SIGNATURE:	a your	
Of days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a mem  (In accordance with	ber or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution astitutes an affirmation under the penalties of perjury d herein are true.)	08
REQUIRED SIGNATURE:  Signature of a mem  (In accordance with of this document contact the facts state	section 608.408(3), Florida Statutes, the execution astitutes an affirmation under the penalties of perjury	06 MAY -5