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Florida Department of State
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To: Division of Corporations
Fax Number : (850)205-0383

From: Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
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DIVISION OF CORPORATIONS

FLORIDA/FOREIGN LIMITED LIABILITY CO
TIVE STUDIO, L.L.C.

Certificate of Status	0
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION
FOR A FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I Name

The name of the Limited Liability Company is:

TIVE STUDIO, L.L.C.

ARTICLE II Principal Place of Business

The principal place of business and mailing address of this Limited Liability Company shall be:

**11436 NW 43RD TERRACE
DORAL, FL 33178**

ARTICLE III Duration

The period of duration for the Limited Liability Company shall be Perpetual.

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ARTICLE IV Management

The Limited Liability Company is to be managed by the members and the name and addresses of the managing members are:

DANIEL GUINAN
11438 NW 43RD TERRACE DORAL, FL 33178

ELIANA CORTES
11436 NW 43RD TERRACE DORAL, FL 33178

ARTICLE V Admission of Additional Members

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be subject to the approval of all current members

ARTICLE VI Members Right to Continue Business

The right, if given, of the remaining members of the Limited Liability Company to continue the business upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited liability Company shall be:



DANIEL GUINAN

Signature of a member or an authorized representative of a member.

(In accordance with Section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under penalties of perjury that the facts stated herein are true.)

**ARTICLE VI Initial Registered Agent and Office
Street Address**

The name and address of the initial registered agent is:

DANIEL GUINAN
11438 NW 43RD TERRACE
DORAL, FL 33178

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**CERTIFICATE DESIGNATING REGISTERED AGENT AND
REGISTERED PLACE OF BUSINESS OR DOMICILE FOR THE
PROCESS WITHIN THE STATE OF FLORIDA, AND ACCEPTANCE OF
AGENT UPON WHOM PROCESS MAY BE SERVED**

Pursuant to the provisions of sections 608.413 or 608.507, Florida Statutes, the
Undersigned Limited Liability Company, organized under laws of the State of
Florida, submits the following statement in designating the registered
office/registered agent, in the State of Florida.

1. The name of the Limited Liability Company is:

TIVE STUDIO, L.L.C.

2. The name and address of the registered agent and office is:

**DANIEL GUINAN
11436 NW 43RD TERRACE
DORAL, FL 33178**

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TALLAHASSEE, FLORIDA

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ACCEPTANCE OF REGISTERED AGENT

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 PURSUANT TO P.S. 608.507.

SIGNATURE

DATE



06/22/06