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COVER LETTER

TO: Registration Se Division of Con				
SUBJECT:	My Stage (Name of Limited	Dance Stude d Liability Company)	lio, LLC	
The enclosed Articles of	f Organization and fee(s) are s	ubmitted for filing.		
Please return all corresp	ondence concerning this matte	r to the following:		
	Staci E.	Name of Person)		-
	My Stage I	Dance Studio	, LLC	-
15	00 lake 1	30-ldwin lane (Address)		-
	Orlando, F	C 328/4 (State and Zip Code)		-
For further information of	concerning this matter, please	call:	06	D.
Staci R	ASSU ()	at (40) 894- (Area Code & Daytime Te	5551 Elephone Number)	SECRETATION OF
Enclosed is a check fo	or the following amount:	(PH S	RY OF S
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Res., Certificate of Status & Certified Copy (additional copy is enclosed)	TATE ATTONS
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must end with the words "Limited Liability Company, "Limited	d Company" or their abbreviation "LEC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1500 Late Baldwin Cone Orlando, FL 32814	1500 Lote Baldwin Lane. Octombo, FC 32814
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	
The name and the Florida street address of the research of the	Pussell 3 Figure 3 Fi
1500 Lake Bal Florida street add	tress (P.O. Box NOT acceptable)
Orlando City, State, a	FL 32814

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.

(CONTINUED)
Page 1 of 2

The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) **ARTICLE V:** Effective date, if other than the date of filing: . (OPTION (If an effective date is listed, the date must be specific and cannot be more than five business days 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

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

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

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee