

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
V	,	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ie)
(Do	cument Number)	
(20		
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



000078490780

08/11/06--01015--006 **130.00

06 AUG -8 PH 2: 17
SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations		-
SUBJECT: Melodie Joy Music (Name of Limited Liability Company)		
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Melodie Joy Gutierrez (Name of Person)		
	TALL	06 4
(Firm/Company)	HATA	6
2794 Woodland Creek Loop	88E	O .
(Address) KISSIMMIR, FL 34744 (City/State and Zip Code)	FLORIDA	2: 17
For further information concerning this matter, please call:		
Patricia Gutilerez at (407) 870- (Name of Person) at (407) 870-	0089	. - . <u>-</u>
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\sum \text{\$130.00 Filing Fee & Certificate of Status}\$ Certificate of Status Certified Copy (additional copy is enclosed)	\$160.00 Filing Fe Certificate of Status & Certified Copy (additional copy is enclosed)	&
Mailing Address Registration Section Registration Section	.	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
Melodic Joy Music "LLC" (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
2794 Woodland Creek Loop 2794 Woodland Creek Loop Lissimmee, #134744 Kissimmee FL 34744
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
Patricia Gutierrez Pos S -
Florida street address (P.O. Box NOT acceptable)
Kissimmle FL 34744 For 20 12 12 12 12 12 12 12 12 12 12 12 12 12
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)

(CONTINUED) Page 1 of 2

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	· · · · · · · · · · · · · · · · · · ·
Manager "MGP"	Myodie Joy Gutierrez 2794 Woodland Criek Loop 1055 mmll FL 34744
MGRM"	Fatricia Gutierrez 2794 Woodland Creek Loop Eissimmee, FL 34744
Use attachment if necessary)	
	the date of filing: (OPTION be specific and cannot be more than five business d
REQUIRED SIGNATURE:	
Signature of a mem	Wy Wertous ber of an authorized representative of a member.
(In accordance with s	section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury

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

Filing Fees:

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

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

Page 2 of 2

L Joy Gutilore Typed or printed name of signee

06 AUG -8 PH 2: 17
SECRETARY OF STATE