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To: Division of Corporations
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From: Account Name : A 1 A CORPORATE SERVICES, INC.
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DIVISION OF CORPORATIONS

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Fist Full of Money Entertainment LLC

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Help

H06000282513 3

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

In compliance with Chapter 608, F.S.

ARTICLE I: NAME

The name of the Limited Liability Company is:

FIST FULL OF MONEY ENTERTAINMENT LLC

ARTICLE II: Address

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

850 NW 11TH AVE. # 11

HALLANDALE, FLORIDA 33009

**ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE & REGISTERED
AGENT SIGNATURE**

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

NICHOLE RHODES

850 NW 11TH AVE. # 11

HALLANDALE, FLORIDA 33009

Having been named as registered agent 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.



NICHOLE RHODES / REGISTERED AGENT'S SIGNATURE

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H06000282513 3

H06000282513 3

PAGE 2

FIST FULL OF MONEY ENTERTAINMENT LLC

ARTICLE IV: MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V: MEMBERS (optional)

MANAGING MEMBER:

NICHOLE RHODES

850 NW 11TH AVE. # 11

HALLANDALE, FLORIDA 33009

MANAGING MEMBER:

AARON SAVARY

850 NW 11TH AVE. # 11

HALLANDALE, FLORIDA 33009

x 

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.)

AARON SAVARY

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