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COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: P	eekaboo Studios, L	LC	
	(Name of Limited	d Liability Company)	
The enclosed Articles of	of Organization and fee(s) are so	ubmitted for filing.	
Please return all corresp	pondence concerning this matte	r to the following:	
	Linn	ette Rosario	
	a	Name of Person)	
	Peek	aboo Studios	
	(Firm/Company)	
	13904	SW 91 Terrace	200h SECI
		(Address)	KÉ KÉ
		i, FL 33186	SSECTION OF THE STATE OF THE ST
	(City)	/State and Zip Code)	
For further information	concerning this matter, please	call:	IATE JRIDA
Linnet	te Rosario	at (305) 383-7;	308
(Name	e of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for	or the following amount:		
□ \$125.00 Filing Fee	□ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$\mathbb{\sigma}\$ \$160.00 Filing Fec, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporatio 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:

The mailing address and street address of the Principal Office Address:	e principal office of the Limited Liability Company i Mailing Address:
13904 SW 91 Terrace Miami, FL 33186	13904 SW 91 Terrace Miami, FL 33186
Na	e Rosario AHASSE ANGELORIA
13904 SW Florida street	91 Terrace To address (P.O. Box NOT acceptable):
	FL 33186
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this capa statutes relating to the proper and complete	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of a performance of my duties, and I am familiar with anacegistered agent as provided for in Chapter 608, F.S

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

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

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Linnette Rosario 13904 SW 91 Terrace Miami, FL 33186
	SECRETARY C
(Use attachment if necessary)	FIGURE 17
ARTICLE V: Effective date, if other than the date an effective date is listed, the date must be to or 90 days after the date of filing.)	late of filing: <u>Dec. 2, 2006</u> . (OPTIONAL) specific and cannot be more than five business days pri
REQUIRED SIGNATURE:	
Signature of a member	or an authorized representative of a member.
	ion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury rein are true.)
	Linnette Rosario

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)

Typed or printed name of signee