

L06000119053

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

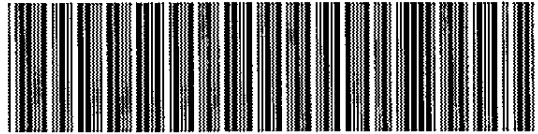
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200082022262

12/15/06--01008--005 **125.00

FILED

06 DEC 14 PM 3:57

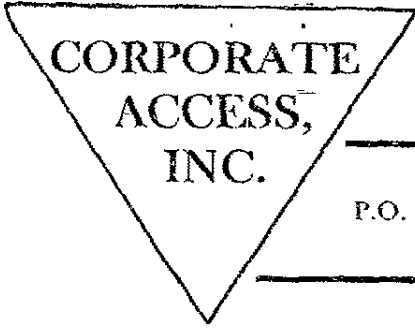
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

2006 DEC 14 PM 2:35

NOT RECORDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING



"When you need ACCESS to the world"

236 East 6th Avenue . Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK IN

PICK UP:

12/14/06

FILED
08 DEC 14 PM 3:57
TALLAHASSEE, FLORIDA

☐ CERTIFIED COPY

☒ PHOTOCOPY

☐ CUS

☒ FILING

LLC

1. EYE TV media, LLC
(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

ARTICLES OF ORGANIZATION
OF
EYE TV MEDIA, LLC

FILED
06 DEC 14 PM 3:57
TALLAHASSEE, FLORIDA

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purposes of forming a *Limited Liability Company* under the laws of the State of Florida do set forth the following:

1. NAME.

The name of the Limited Liability Company is: EYE TV MEDIA, LLC.

2. PERIOD OF DURATION.

The period of duration of the Limited Liability Company shall be from the date of filing until the first to occur of the following:

(i) Fifty (50) years from the date of filing of these Articles of Organization with the Department of State, or

(ii) Dissolution of the Limited Liability Company pursuant to provisions of the Florida Limited Liability Company Act.

3. PURPOSE.

The purpose for which the Limited Liability Company is organized is to engage in any and all business and activities permitted by the laws of the State of Florida. The Limited Liability Company shall have all of the powers vested in a Limited Liability Company organized and existing by virtue of such laws.

4. ADDRESS OF PLACE OF BUSINESS AND MAILING ADDRESS OF BUSINESS.

The address of the place of business in Florida for the Limited Liability Company is: 554 Lake Ave., Altamonte Springs, FL 32701. The mailing address of the business in Florida for the Limited Liability Company is: 554 Lake Ave., Altamonte Springs, FL 32701.

5. REGISTERED AGENT.

The name and address of the initial registered agent in Florida for the Limited Liability Company is: Jeffrey A. Icardi, 2180 West State Road 434, Suite 6190, Longwood, Florida 32779.

6. CAPITAL CONTRIBUTIONS.

The total amount of cash and a description of the agreed value of property other than cash contributed to the Limited Liability Company is as follows: one hundred dollars (\$100.00) in cash and no other property is being contributed to the Limited Liability Company.

7. ADDITIONAL CONTRIBUTIONS.

The total additional contributions, if any, agreed to be made by all members and the times at which, or the events which will cause the same, that shall be made, are as follows: no additional contributions have been agreed to at the date of filing of these Articles of Organization. Additional contributions, if any, will be made upon unanimous agreement by all of the members of the Limited Liability Company.

8. ADDITIONAL MEMBERS.

Members may admit additional members upon unanimous agreement of the existing members.

9. CONTINUITY OF 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, the business of the Limited Liability Company shall not be continued and the Limited Liability Company shall be dissolved unless there is obtained the consent of all the remaining members of the Limited Liability Company.

10. MEMBERS. The initial members of the Limited Liability Company are as follows:

Michael J. Brach
554 Lake Ave.
Altamonte Springs, FL 32701.

Timothy Hohman
335 John's Creek Parkway
St. Augustine, FL 32092.

11. MANAGEMENT.

The Limited Liability Company is to be manager-managed. The name and address of the manager is as follows:

ACCEPTANCE BY REGISTERED AGENT

Having been appointed the registered agent of EYE TV MEDIA, LLC, the undersigned accepts such an appointment, agrees to act in such capacity and accepts the obligations proposed by Florida Statutes, Section 608.415 and is herewith simultaneously designated as registered agent by EYE TV MEDIA, LLC.

Executed this 12th day of December 2006.

BY: _____

Jeffrey A. Icardi,
Registered Agent

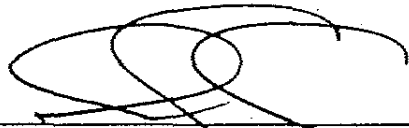
FOR THE LIMITED LIABILITY COMPANY:

BY: _____

Michael J. Brach

Michael J. Brach
554 Lake Ave.
Altamonte Springs, FL 32701.


Executed at Altamonte Springs, Seminole County, Florida, on the 12th day of December
2006.


BY: 
Michael J. Brach

STATE OF FLORIDA
COUNTY OF SEMINOLE

ON THIS, the 12 day December 2006, before me personally appeared MICHAEL J. BRACH, a member of EYE TV MEDIA, LLC, a Florida Limited Liability Company to be formed, to me known to be the person who executed the foregoing, and acknowledged before me that he executed the same for the purposes expressed therein.

IN WITNESS WHEREOF, I have hereunto set my hand and seal in the County and State aforesaid.

NOTARY PUBLIC-STATE OF FLORIDA
 Shawna Palmer
Commission # DD461747
Expires: AUG. 14, 2009
Bonded Thru Atlantic Bonding Co., Inc.


NOTARY PUBLIC
My Commission Expires: