

L07000021735

(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



600088790526

02/28/07--01021--025 \*\*160.00

EFFECTIVE DATE  
02/19/07

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 FEB 26 PM 3:43

J. BRYAN FEB 27 2007

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Colvin Entertainment Group LLC  
(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:

Jahi Asad Nelson  
(Name of Person)

Colvin Entertainment Group  
(Firm/Company)

3702 Palm Desert Lane  
(Address)

Orlando Florida 32839  
(City/State and Zip Code)

FILED IN STATIONS  
SECRETARY OF CORPORATIONS  
DIVISION OF CORPORATIONS  
07 FEB 26 PM 3:43

For further information concerning this matter, please call:

Jahi A. Nelson at (720) 841-3235  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, 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 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:

Colvin Entertainment Group LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 FEB 26 PM 3:13

**ARTICLE II - Address:**

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

**Principal Office Address:**

3702 Palm Desert Lane  
Suite 5427  
Orlando FL 32839

**Mailing Address:**

3702 Palm Desert Lane  
Suite 5427  
Orlando FL 32839

**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:

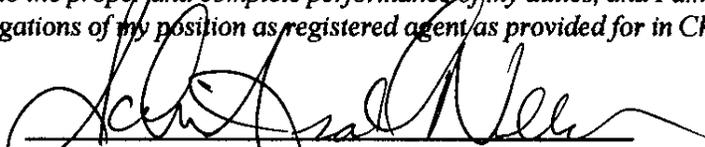
**EFFECTIVE DATE**  
02/19/07

Jahi Asad Nelson  
Name

3702 Palm Desert Lane Ste 5427  
Florida street address (P.O. Box **NOT** acceptable)

Orlando FL 32839  
City, State, and Zip

*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)

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

Jahi Asad Nelson

3702 Palm Desert Lane  
Suite 5427  
Orlando Florida 32839

Monica T. Nelson

3702 Palm Desert Lane  
Suite 5427  
Orlando Florida 32839

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

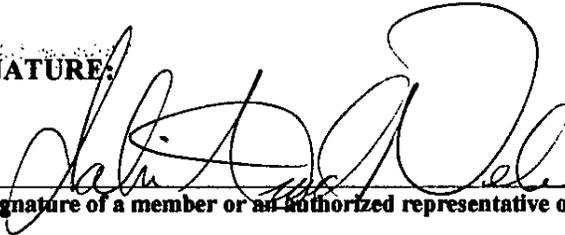
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

FILED OF STATE  
SECRETARY OF CORPORATIONS  
DIVISION OF CORPORATIONS  
07 FEB 26 PM 3:43

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: February 19, 2007. (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**



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.)

Jahi Asad Nelson

Typed or printed name of signee

**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)