

FROM : LAZARUS  
Division of Corporations

FAX : 305-220-1440

May. 01 2007 09:37 AM P1

607000046373

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H070001193873)))



H070001193873ABC3

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850) 205-0383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : 120000000019  
Phone : (305) 552-5973  
Fax Number : (305) 220-1440

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2007 MAY -1 AM 9:46

FILED

RECEIVED

07 MAY -1 AM 11:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**MUSICOSMOS PRODUCTIONS, L.L.C.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

607-46373  
JK

H 0 7 0 0 0 1 1 9 3 8 7

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

**ARTICLE I NAME**

The name of the Limited Liability Company is: **MUSICOSMOS PRODUCTIONS, LLC.**

**ARTICLE II ADDRESS**

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

**600 MINOLA DRIVE  
MIAMI SPRINGS, FL 33166**

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE AND  
REGISTERED AGENT'S SIGNATURE**

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

**JAIME OCHOA**

\_\_\_\_\_  
(NAME)

**600 MINOLA DRIVE**

\_\_\_\_\_  
FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE)

**MIAMI SPRINGS, FL 33166**

\_\_\_\_\_  
(CITY/STATE/ZIP)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

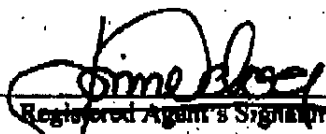
2007 MAY - 1 AM 9:46

FILED

H 0 7 0 0 0 1 1 9 3 8 7

H07000119387

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 THE CHAPTER 608, F.S.

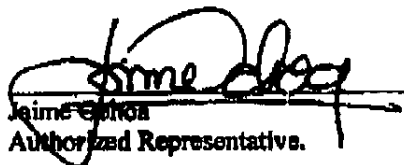
  
Registered Agent's Signature

**ARTICLE IV MANAGEMENT**

Management of this limited liability company is reserved to its members, whose names and addresses are as follows:

JAIME OCHOA  
600 MINOLA DRIVE  
MIAMI SPRINGS, FL 33166  
MANAGER

Executed by the undersigned members of the limited liability company this: 24<sup>TH</sup> day of March 2007.

  
Jaime Ochoa  
Authorized Representative.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2007 MAY -1 AM 9:45

FILED

H07000119387