

LO7000047470

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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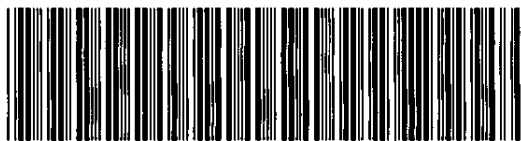
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07 MAY -3 AM 9:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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07 MAY -3 PM 1:01

DEPT. OF REVENUE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

*Home Grown Entertainment +
Productions, LLC*

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TALLAHASSEE, FLORIDA

- ___ Art of Inc. File _____
- ___ LTD Partnership File _____
- ___ Foreign Corp. File _____
- ☒ ___ L.C. File _____
- ___ Fictitious Name File _____
- ___ Trade/Service Mark _____
- ___ Merger File _____
- ___ Art. of Amend. File _____
- ___ RA Resignation _____
- ___ Dissolution / Withdrawal _____
- ___ Annual Report / Reinstatement _____
- ☒ ___ Cert. Copy _____
- ☒ ___ Photo Copy _____
- ___ Certificate of Good Standing _____
- ___ Certificate of Status _____
- ___ Certificate of Fictitious Name _____
- ___ Corp Record Search _____
- ___ Officer Search _____
- ___ Fictitious Search _____
- ___ Fictitious Owner Search _____
- ___ Vehicle Search _____
- ___ Driving Record _____
- ___ UCC 1 or 3 File _____
- ___ UCC 11 Search _____
- ___ UCC 11 Retrieval _____
- ___ Courier _____

Signature _____

Requested by: *WL* *5/3* *11:00*

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

By' Articles of Organization
Florida Limited Liability Company
In compliance with Chapter 608, Florida Statutes.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I
NAME

The name of the Limited Liability Company is HOMEGROWN ENTERTAINMENT & PRODUCTIONS, LLC

ARTICLE II
PRINCIPAL OFFICE

The mailing address of the company shall be 16266 SW 14th Street, Pembroke Pines, FL 33027

ARTICLE III
DURATION

The limited liability company shall have the perpetual existence commencing upon filing of the Articles of Organization with the Secretary of State.

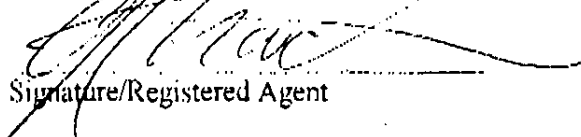
ARTICLE IV
REGISTERED AGENT

The name and street address of the registered agent are:

Catherine Goodall
16266 SW 14th Street
Pembroke Pines, FL 33027

ACCEPTANCE OF REGISTERED AGENT

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in the Articles of Organization, we hereby accept this appointment of, and designation as, registered agent for service of process within the State of Florida of the proposed limited liability company named in the Articles of Organization hereinabove set forth and so hereby further state that we may be found as registered agent for service of process upon said proposed limited liability company at the address set forth in Article V of such Articles.


Signature/Registered Agent

MAY 3, 2007
Date

ARTICLE V
PURPOSE

The limited liability company shall be authorized to engage in and transact any and all lawful business within and without the State of Florida or United States for which companies may be organized under Chapter 608, Florida Statutes, as amended and supplemented.

ARTICLE VI
POWERS

The limited liability company shall have all of the powers conferred upon companies organized pursuant to the provisions of Chapter 608, Florida Statutes, as amended and supplemented.

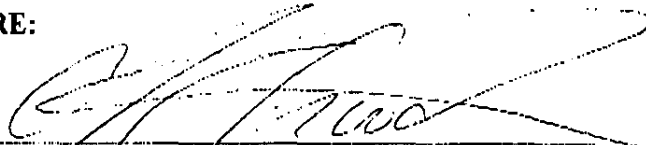
ARTICLE VII
MANAGERS AND/OR MANAGING MEMBERS

MGRM Kymani Marley, *CEO*
 8601 Buckskin Manor
 Davie, FL 33328

MGRM Catherine Goodall
 16266 SW 14th Street
 Pembroke Pines, FL 33027

MGRM Shaquel Leon
 4142 NE 26th Street
 Miami, FL 33033

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).

CATHERINE GOODALL
Type or printed name of signee

MAY 3, 2007
Date