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TO:	Registration Se Division of Co		,		
SUBJI	ECT: SEGA	International, L.L.C.	d Liability Compa	nny)	
		(Name of Entitle	d Liability Compa	.iy <i>)</i>	
The en	sclosed Articles of	f Organization and fee(s) are s	submitted for filing	<u>;</u> .	
Please	return all corresp	ondence concerning this matte	er to the following	:	
	James Dola	an			
		(Name of Person)		
	SEGA Inter	rnational, L.L.C.			
			(Firm/Company)		
	603 Live C	oak Lane			
			(Address)		
	Weston, F	L 33327			2001 17.31 17.31
		(City	/State and Zip Code)	1836 1840 1941
For fu	rther information	concerning this matter, please	call: . or .	ing and an experience of the contraction of the con	200 JUN 11 PH 12: 56 SECRETARY OF STATE TAIL AHASSEE, FLOORID IMPERIOR OF STATE IMPE
Jame	es Dolan		at (954	648-4326	H 12:
		of Person)	(Area Code	& Daytime Telephone Nu	imber) = = 5
Enclo	sed is a check fo	or the following amount:			. :
✓ \$125	5.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fi Certified Copy (additional copy)	y Certific is enclosed) Certific	0.00 Filing Fee, ate of Status & ed Copy at copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division Clifton B 2661 Exe	ourier Address on Section of Corporations uilding cutive Center Circle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name							
The name of the Lim	ited Liability	Company is:			•		
SEGA International, I							
(Must end with the words "I	imited Liability	Company, "Limited Com	ipany" or their abbreviat	ion "LLC," or "L.C.,")			
ARTICLE II - Addı	ess:						
The mailing address	and street ad	dress of the princip	al office of the Lir	mited Liability Compan	y is:		
Principal Office Address:		<u>Ma</u>	iling Address:				
603 Live Oak Lane		РО	PO Box 266273				
Weston, FL 33327			Weston, FL 33326 .				
ARTICLE III - Reg (The Limited Liability Compusiness entity with an acti The name and the Flo	pany cannot serv ve Florida regist orida street ac	e as its own Registered A ration.) ddress of the regist	gent. You must designa		o Landa de la companya de la company		
Maria M. Dolan				- ios ios	ASTAIL AN		
Name			翌 5				
603 Live Oak Lane			.×				
_	1	Florida street address (P.O. Box NOT accept	table)			
<u> </u>	eston,	FL	33327				
_		City, State, and Zi	p				
Having been named	as registered	l agent and to accep	t service of proces:	s for the above stated lin	nited		

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) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member **MGRM** James Dolan 603 Live Oak Lane Weston, FL 33327 MGRM Juan Martinez 1442 W Fullerton Ave. Unit 2C Chicago IL 60614 (Use attachment if necessary) **ARTICLE V:** Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business da 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.) James Dolan 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)