L07000094004

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(co.), consequences,
PICK-UP WAIT MAIL
•
(Business Entity Name)
(Document Number)
(Social Manager)
Certified Copies Certificates of Status
Certified copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800109216768

09/13/07--01011--008 **130.00

07 SEP 13 AM 10: 5

SI CRETARY OF STATE
SI CRETARY OF STATE

COVER LETTER

TO:	Registration Division of C		
SUBJE	CT.	PANGAEA WOF	RLD FESTIVAL LLC
SUBJE			ed Liability Company)
The end	closed Articles	of Organization and fee(s) are s	submitted for filing.
Please	return all corres	pondence concerning this matt	ter to the following:
			Silverio, Esq.
		((Name of Person)
		Silverio	& Hall, P.A.
		,	(Firm/Company)
		150 West	Flagler Street
·			(Address)
		Miami, F	Florida 33130
•		(City	y/State and Zip Code)
For furt	her information	concerning this matter, please	e call:
Bria	n M. Silv	rerio	at (305) 371-2756
•	(Nam	e of Person)	(Area Code & Daytime Telephone Number)
Enclos	ed is a check f	or the following amount:	
□ \$125.0	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy Certificate of Status & Cadditional copy is enclosed) 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

SILVERIO & HALL

PROFESSIONAL ASSOCIATION

ATTORNEYS AT LAW

MUSEUM TOWER . PENTHOUSE 2850

150 WEST FLAGLER STREET

MIAMI. FLORIDA 33130-1557

TELEPHONE (305) 371-2756

FACSIMILE (305) 372-2744 miami@silveriohall.com

www.silveriohall.com

NAPLES OFFICE

400 FIFTH AVENUE SOUTH
SUITE 301

NAPLES, FLORIDA 34102-6566

TELEPHONE (239) 649-1001

FACSIMILE (239) 649-1972

NAPIOS@silveriohall.com

MIAMI DIRECT (239) 597-1665

September 11, 2007

VIA REGULAR MAIL

BOARD CERTIFIED MARITAL & FAMILY LAWYER

MARK V. SILVERIO

CYNTHIA BYRNE HALL

TANNEBAUM WEISS, LLP

BRIAN M. SILVERIO

State of Florida
Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: Pangaea World Festival LLC

Dear Sir or Madam:

Enclosed is the original of the Articles of Organization for Florida Limited Liability Company and Certificate Designating Registered Agent and Place of Business or Domicile for the Service of Process Within Florida for the above company. Please file the original in your offices and certify and return to us the certificate of status. We are enclosing our check in the amount of \$130.00 covering the filing fee, registered agent designation, and certificate of status.

Thank you for your assistance in this matter.

Very truly yours,

Brian M. Silverio

BMS:ge Enclosures

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PANGAEA WORLD FESTIVAL LLC

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

ARTICLE II - Address:

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

Principal Office Address:	Maining Address:
20900 NE 30th Avenue	20900 NE 30th Avenue
Suite 210	Suite 210
Aventura, Florida 33180	Aventura, Florida 33180
	· · · · · · · · · · · · · · · · · · ·

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:

Brian M. Silve	erio, Esq
Name	
150 West Flagler St	reet PH 2850
Florida street addres	ss (P.O. Box NOT acceptable)
Miami	_L 33130
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)

Page 1 of 2

SECRETARY OF STATE OF STATE OF CORPERATIONS

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

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

	Name and Address:	
"MGR" = Manag "MGRM" = Mana		
Director	Gladys Mezrahi	
	20900 NE 30th Avenue Suit	te 210
	Aventura, Florida 33180	
Officer	Wally Vincenty	
	312 Elm Street	
	Hollywood, Florida 33019	
Officer	Indigo Events Corporation	1
	20900 NE 30th Avenue Suit	
	Aventura, Florida 33180	
	ate, if other than the date of filing:ed, the date must be specific and cannot be more the	· ,
CLE V: Effective d effective date is liste 00 days after the date REQUIRED SIG	ed, the date must be specific and cannot be more the of filing. NATURE: Continue of filing of the cannot be more the offiling of the cannot be more the offiling.	han five business days p
CLE V: Effective d effective date is liste 00 days after the date REQUIRED SIG	ed, the date must be specific and cannot be more the of filing.) NATURE:	han five business days p
CLE V: Effective d effective date is liste 00 days after the date REQUIRED SIG	ed, the date must be specific and cannot be more the of filing. NATURE: Continue of filing of the cannot be more the offiling of the cannot be more the offiling.	han five business days p a member.
CLE V: Effective d effective date is liste 00 days after the date REQUIRED SIG	ed, the date must be specific and cannot be more the of filing.) NATURE: Signature of a member or an authorized representative of this document constitutes an affirmation under the penaltic	a member.

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)