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Certified Copies	_ Certificates	of Status
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# **COVER LETTER**

TO: Registration Se Division of Cor						
SUBJECT: EFDEE	MUSIC, LLC					
	(Name of Limite	d Liability Compa	ny)			
The enclosed Articles of	Organization and fee(s) are s	submitted for filing	•			
Please return all correspo	ondence concerning this matte	er to the following:				
Ms. Franki	e Derrick					
	(	Name of Person)				
EFDEE MI	JSIC, LLC				TALL	07 01
		(Firm/Company)			ATC:	-C
5423 Wind	ing Way				SEE O	0 _P
		(Address)			S. J.	2 H
MERRITT	ISLAND, FL 3295	3-7716				PH 12: 18
	(City	//State and Zip Code)	,			
For further information c	oncerning this matter, please	call:				
Ms. Frankie De	rrick	at ( 321 )	452-362	5		
(Name o	of Person)	(Area Code	& Daytime Tel	ephone Number)		
Enclosed is a check for	r the following amount:					
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Certified Cop (additional copy	y	\$160.00 Filir Certificate o Certified Co (additional cop	f Status py	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division of Clifton Bu 2661 Exec	of Corporations	s		

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY **ARTICLE I - Name:** The name of the Limited Liability Company is: EFDEE MUSIC, 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: **Mailing Address: Principal Office Address:** 5423 Winding Way 5423 Winding Way MERRITT ISLAND, FL 32953-7716 MERRITT ISLAND, FL 32953-7716 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: Frankie Derrick Name 5423 Winding Way Florida street address (P.O. Box NOT acceptable) Merritt Island, FL 32953-7716 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)

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

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

MGRM	Mr. Frank Derrick 5423 Winding Way
	Merritt Island, FL 32953-7716
MGRM	Ms. Frankie Derrick
	5423 Winding Way
	Merritt Island, FL 32953-7716
	OF DEC 10 TABLE AND OF THE SEE OF
(Use attachment if necessary)	SEE T
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.)	be specific and cannot be more than five business have p

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.)

### Frank Derrick

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)