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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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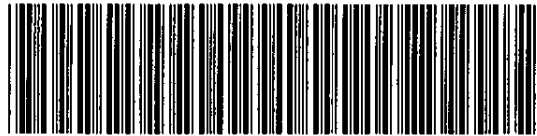
(Business Entity Name)

(Document Number)

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**Mowrey & Mitchell, P.A.**  
Attorneys at Law

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January 28, 2008

Department of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

RE: Nocturnal Seduction Entertainment Group, LLC

Dear Sirs:

Enclosed please find an original Articles of Organization for the above-referenced limited liability company along with a check in the amount of \$125.00.

Please file this LLC with your office at your earliest convenience and return it to me in the pre-paid postage envelope provided. herein. If you have any questions, please give me a call.

Thank you.

Very truly yours,



Tracy E. Douglas, Secretary for  
Ronald A. Mowrey

:ted  
Enclosures

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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION OF LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is: Nocturnal Seduction Entertainment Group, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

2700 W. Pensacola St., Apt. 2013  
Tallahassee, Florida 32304

**Mailing Address:**

2700 W. Pensacola St., Apt. 2013  
Tallahassee, Florida 32304

**ARTICLE III - Registered Agent, Registered Office, Registered Agent's Signature:**

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

Michael Jonczyk  
Name  
2700 W. Pensacola St., Apt. 2013  
Florida Street Address (P.O. Box **NOT** acceptable)  
Tallahassee, Florida 32304  
City, State and Zip Code

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*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, Florida Statutes.*

M. Jonczyk  
Registered Agent's Signature

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

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

**Title**

"MGR" = Manager

"MGRM" = Managing Member

MGRM

**Name and Address:**

Michael Jonczyk  
2700 W. Pensacola St., Apt. 2013  
Tallahassee, Florida 32304

**REQUIRED SIGNATURE:**

M. Jonczyk

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.)

Michael Jonczyk

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)

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