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T. CLINE

APR - 1 2008

EXAMINER



SETON & ASSOCIATES

A LAW CORPORATION

March 21, 2008

To Whom It May Concern:

Enclosed herewith please find an original copy and duplicate copy of the Articles of Organization for Tori Amos Galactic, LLC and a check for \$155.00.

Upon receipt, please file these Articles and return the duplicate filed copy in the self-addressed OVERNIGHT envelope to our offices. Please also fax back to our attention at 213-947-4948, if possible.

Thank you in advance for your attention to this matter. If you have any questions, please feel free to call us prior to any rejection.

Very truly yours,

Kent E. Seton, Esq.

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8730 Wilshire Blvd., Suite 400
Beverly Hills, California 90211

Telephone 310.557.1923
Facsimile 213.947.4948
kseton@setonlawgroup.com

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tori Amos Galactic, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kent E. Seton

(Name of Person)

Seton & Associates

(Firm/Company)

8730 Wilshire Blvd, Suite 400

(Address)

Beverly Hills, CA 90211

(City/State and Zip Code)

For further information concerning this matter, please call:

Kent Seton

(Name of Person)

at (310) 557-1923

(Area Code & Daytime Telephone Number)

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Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☒ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Tori Amos Galactic, 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:c/o 2336 SE Ocean Blvd.Stuart, FL 24996**Mailing Address:**2336 SE Ocean Blvd.Box # 177Stuart, FL 34996**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:


National Registered Agents, Inc.

Name

2731 Executive Park Drive, Suite 4Florida street address (P.O. Box **NOT** acceptable)WestonFL 33331

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)

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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

Name and Address:

MGRM _____

Tori Amos

2336 SE Ocean Blvd., # 177

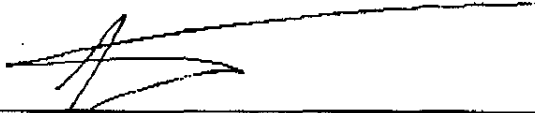
Stuart, FL 34996

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (Optional)
 (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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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.)

Kent E. Seton, Authorized Representative

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)