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COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	CT: KEYSTONE PRODUCTIONS ENT. LLC (Name of Limited Liability Company)
	(Name of Limited Liability Company)
The encl	losed Articles of Organization and fee(s) are submitted for filing.
Please re	eturn all correspondence concerning this matter to the following:
_	Mary WOSSERBERG (Name of Person)
	·
_	Keystons Productions Ent. CLC, (Firm/Company)
_	124 VIZCAYO ESTOTOS DR. (Address)
	(Address)
_	Palu Brach GARDEAS, F1 334/8 (City/State and Zip Code)
	(City/State and Zip Code)
For furth	ner information concerning this matter, please call:
\underline{M}	(Name of Person) at (SU) 636 05/0 (Area Code & Daytime Telephone Number)
	(Name of Person) / (Area Code & Daytime Telephone Number)
Enolose	d is a check for the following amount:
[]\$125.0	0 Filing Fee \$\bigcup \\$130.00 Filing Fee \& Certificate of Status \$\bigcup \\$ Certified Copy (additional copy is enclosed) \$\bigcup \\$ Certified Copy (additional copy is enclosed)
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
KEYSTONS PRODUCTIONS ENT 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: Mailing Address:
PAIM BEACHGARDERS 4- SOND
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 enanother business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
Marty WASSERBERG SSA = 1
124 Vizcaya IsTaTes DR
Florida street address (P.O. Box NOT acceptable)
Palm Boach GARDERS F1 33 45 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

(CONTINUED) Page 1 of 2

<u>Title:</u> "MGR" = Mar "MGRM" = M	nager fanaging Member	Name and Address:		
MGR		MORTY WASSERBEN 124 VILLAYA ESTET PELM BORCH GARDENS	RG es OR	
		Palm Barch GARDENS	Flzz	.418
-				
				
·	nt if necessary)	e date of filing:	OPTION	(AL)
CLE V: Effective date is	ve date, if other than the listed, the date must b	e date of filing: (0		
CLE V: Effective date is 90 days after the	ve date, if other than the listed, the date must b			
CLE V: Effective date is 90 days after the	ve date, if other than the listed, the date must be date of filing.)			
CLE V: Effective date is 90 days after the	ve date, if other than the listed, the date must be date of filing.) SIGNATURE:			

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)