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10/27/08--01036--005 **125.00

SECRETARY OF STATE DIVISION OF CORPORATION

J. BRYAN 0CT 2 8 2008

EXAMINER

COVER LETTER

TO: Registratio Division of	n Section Corporations		
SUBJECT:	THE POWSHED (Name of Limite	Movie, LLC d Liability Company)	
The enclosed Article	s of Organization and fee(s) are s	ubmitted for filing.	
Please return all corr	espondence concerning this matte	er to the following:	
GREG	ORY SEGAL		0 2
		Name of Person)	08 OCT 2
-	((Firm/Company)	
1820	JAMES AVENU	E, APT. 5F	3 AH 11: 48
			خ کی کی
MIAMI	BEACH, FL	33139	
	(City	/State and Zip Code)	
For further informati	on concerning this matter, please	call:	
ERIC PRI	esley	at (310) 760 - 1076 (Area Code & Daytime Telephone Number	
(Na	me of Person)	(Area Code & Daytime Telephone Number	er)
Enclosed is a check	for the following amount:		
\$125.00 Filing Fed	e \$\square\$\$130.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	e of Status &
	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	

ARTICLE I - Name: The name of the Limited Liability Company is: The Punished Movie, 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: 1820 James Are, #5F MIAMI BEACH, FL 33139 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: Latebory Legan Name

Plorida street address of the registered agent are.

| REGORY SEGAL | Name |
| 1820 JAMES Ave. | APT 5F |
| Florida street address (P.O. Box NOT acceptable) |
| MIAMI BEACH | FL | 33139 |
| 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..

Registored Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or M The name and address of each Man	3.4
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	RHM FILM, LCC 229 BICKNEUL ST., APT 301 SANTA MOMCA CA 90405
MGRM	SAWYER SEGAL PRODUCTIONS 375 S. END AVE. #11M NEW YORK NY 10280
MGAM	KINGS VIEW PRODUCTIONS, LLC 24481 KINGS VIEW LAGUNA MGUEL, CA 92677
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than a (If an effective date is listed, the date mus to or 90 days after the date of filing.)	the date of filing: (OPTIONAL) t be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Signature of a men	nber of an authorized representative of a member.
of this document co	esection 608.408(3), Florida Statutes, the execution institutes an affirmation under the penalties of perjury ed herein are true.) Fight, SawyER SEGAL ROOLTINS, LLC
_ GREGORY	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)