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(Requestor's Name)
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(Business Entity Name)
(Document Number)
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S. HAWKESNOV 2 6 2008

EXAMINER

COVER LETTER

TO: Registration S Division of C			
SUBJECT: Chip (City Productions &	Solutions	
Sobolet.		ed Liability Company)	
The enclosed Articles	of Organization and fee(s) are s	submitted for filing.	
Please return all corres	pondence concerning this matt	er to the following:	
Julio Migu	ıel Cruz Jr.		
	((Name of Person)	
Chip City	Productions & Sol	utions	
		(Firm/Company)	
999 Siest	a Key BLVD Apt# 2	215	
	•	(Address)	
Deerfield	Beach, FL 33441 l	JS	
	(Cit	y/State and Zip Code)	
For further information	concerning this matter, please	call:	
Julio Miguel C	ruz Jr.	at (_754) 235-958	5
(Nam	e of Person)	(Area Code & Daytime Tele	ephone Number)
Enclosed is a check f	for the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 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 Of Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Chip City Productions & Solutions, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

Principal Office Address:

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

Mailing Address:

2 111301 11130 1113		
999 Siesta Key BLVD Apt# 215	999 Siesta Key BLVD Apt# 215	
Deerfield Beach, FL 33441 US	Deerfield Beach, FL 33441 US	

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:

Julio Migu	el Cruz Jr.	
•	Name	

999 Siesta Key BLVD Apt# 215

Florida street address (P.O. Box NOT acceptable)

Deerfield Beach, FL -33441

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)
Page 1 of 2

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

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

MGRM	Julio Miguel Cruz Jr.
	999 Siesta Key BLVD Apt# 215
	Deerfield Beach, FL 33441 US
	
	M ^A
(Use attachment if necessary	ry)
	er than the date of filing: (OPTIONAL)
	ate must be specific and cannot be more than five business days prio
	g.)
days after the date of filin	
days after the date of him	
REQUIRED SIGNATU	E:

Julio Miguel Cruz Jr.

that the facts stated herein are true.)

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)