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PAGE 01/05



# FLORIDA/FOREIGN LIMITED LIABILITY CO.

Klass-Sick Studios LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

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## TRANSMITTAL LETTER

IO:	Registration Section
	Division of Corporations

SUBJECT: Klass-Sick Studios LLC

Karmella Fredrick

(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:

(Name of Person)

Legalzoom.com, inc.

(Fim/Company)

7083 Hollywood Blvd., Suite 180

(Address)

Los Angeles, CA 90028

(City/State and Zip Code)

For further information concerning this matter, please call:

 Kermelia Frødrick
 at (323)
 962-8600

 (Name of Person)
 (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

🗂 \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	SISS.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$160.00 Filing Pee, Certificate of Status & Certified Copy (additional comy is esployed)
			(additional copy is enclosed)

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassce, Florida 32399 MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

01/16/2009	08:36	850-245-6804	DEP	T. OF STATE	PAGE	03/05
1.月前中自重 <b>外体电子2000</b> 8	198228 FAX	N4.7.90W2.4#4 (1864) (* 41	E MLARBARODN244	( <b>4</b> ) - 《《《說書》(古希知是 <b>教</b> 人)(大学)。 (1)	. 45004 <b>/ 457 40</b>	100251181026 FAX
H090000	<b>M919</b> 3	tyzense – 1 S	· · ·	12 <u>20 - 2018</u>	L1- 7900	004910 3
	ARTICLE	ES OF ORGANIZAT	ION FOR FLOR	IDA LIMITED LIABII	ITY COMPANY	
		E I - Name: of the Limited Liabili	ity Company is:			
	Klass-Sick	Studios LLC	- test - weak	•		
		E II - Address: ng address and street a	address of the princi	pal office of the Limited Li	ability Company is	:
	Principal	Office Address:	M	ailing Address:		
	Winter Spi	Avenue Suite 166 dings, FL 32708	Wi	55 Belle Avenue Suite 188 hter Springs, FL 32708		
	ARTICL	E III - Registered Ag	ent, Registered Of	ice, & Registered Agent's	s Signature:	পাল প্রায় কর্মন শিক্ষ কর্মন শ্বেদ্রাগের্গ্র হি
	The name	and the Florida street	address of the regis	tered agent are:	SSE 16	
			Corporation Agents,			
		13302 Wndir	Name ng Oaks Blvd., Suite A	-100	AH 8: 32 OF STATE EE. FLORING	<sup>у</sup> ы <sub>нат</sub> се <sup>4</sup> .
				(P.O. Box NOT acceptable)	N N	
		Татра	FL	33612		

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 ogent 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.

> Karmelia Fredrick, US Corp. Agents Registered Agent's Signature

> > (CONTINUED)

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	ART) The n	CLE IV- Manager(s) ame and address of eac	or Managing Member(s): h Manager or Managing Member is as follows:	
		R" = Manager RM" = Managing Mem	<u>Name and Address:</u> ber	
	MGRN	1	Alexandre Isobe	
			1255 Belle Avanue Suite 186	
			Winter Springs, FL 32708	
	MGRN	1	Brian Hutcheson	
			1255 Belle Avenue Sulte 186	
			Winter Springs, FL 32708	
	MGRN	1	Xavier Berry	
			1265 Belle Avenue Sulte 186	
			Winter Springs, FL 32708	
	MGRM	R	Yoshiya Morita	
			1255 Belle Avenue Suite 188	
			Winter Springs, FL 32708	

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

**REQUIRED SIGNATURE:** 

K-I-	TAI	2009	
Signature of a member or an authorized representative of a member.	ECR	3	-
(In accordance with section 608.408(3), Florida Starutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	RETARY NHASSE	IAN 16	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Karmelia Fredrick, Legalzoom.com, Inc.	me	17	
Typed or printed name of signes	IS.	AX 8:	(
Filing Free:	TATE ORIDA	: 32	
5.00 Filing Fee for Articles of Organization and Designation	<u>.</u>	•	

\$125.00 Filling Fee for Articles of Organi of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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### Attachment to

#### Articles of Organization of

#### Klass-Sick Studios LLC

Additional member are:

Name of Member Adam Russell Gravett Ian Tucker Carr Josh Jacobson <u>Address</u> 1255 Belle Avenue Ste., 186, Winter Springs, FL 32708 1255 Belle Avenue Ste., 186, Winter Springs, FL 32708

1255 Belle Avenue Ste., 186, Winter Springs, FL 32708

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