

L09000008275

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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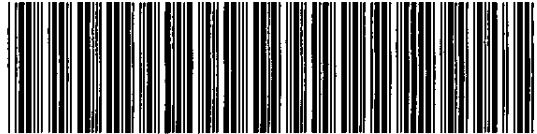
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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T. HAMPTON

JAN 27 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CULTURE Et SPIRITUALITE Internationale Media Production
(Name of Limited Liability Company) LLC.

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

Please return all correspondence concerning this matter to the following:

LAURE Elisabeth Viersac
(Name of Person)

(Firm/Company)

17021 NORTH Bay Road #114
(Address)

SUNNY Island Beach, FL 33160
(City/State and Zip Code)

For further information concerning this matter, please call:

Shirleen Viersac at (786) 326-6345
(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 ☐ \$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:

Culture Et Spirituality Internationale Media Production L.L.C
(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:

17021 North Bay Road #114
Sunny Island Beach
FL 33160

SAME

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:

children & families EMPOWERment center, Inc.
Name

1725 NE 164th St North Miami Bch
Florida street address (P.O. Box **NOT** acceptable)

North Miami Bch FL 33162
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:

MGR

LAURE Elisabeth Viersac
17021 Northbay Road #114
Sunny Island Bch, FL 33160

MGRM

MARYLEEN MERCERON
17900 NW 19th St
Pembroke Pines, FL 33029

MGRM

Shirleen Viersac
17021 Northbay Road #114
Sunny Island Beach, FL 33160

MGRM

Redhmann Viersac
17021 Northbay Road #114
Sunny Island Bch, FL 33160

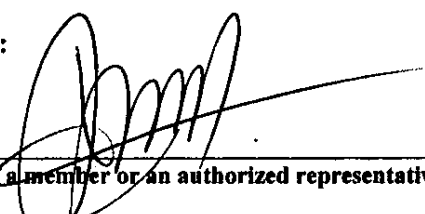
(Use attachment if necessary)

See Attachment

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.)

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.)

LAURE ELIZABETH VIER SAC

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)

Title:

Name and Address:

MGRM

Daisy VIER SAC
17021 North Bay Road # 114
Sunny Island Beach, Fl 33160

MGRM

Jean-Pierre VIER SAC
17021 North Bay Road # 114
Sunny Island Beach, Fl 33160

MGRM

Giovanni MERCERON
17900 NW 19th Street
Pembroke Pines, Fl 33029

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