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COVER LETTER

TO:

Registration Section

Division of C	Corporations				
SUBJECT:	Mystro Enterta	ainment Productions, L	LC		
	(Name of Limited Liability Company)				
The enclosed Articles	of Organization and fee(s) are s	submitted for filing.			
Please return all corre	spondence concerning this matt	er to the following:			
		arlotte Gass			
	t	(Name of Person)			
	Mystro Entertair	nment Productions, LL	.c		
		(Firm/Company)			
	54383 N	/larsh Road			
		(Address)	2000 TAI		
	Callahan,	Florida 32011	CRE OF FE		
	(City	//State and Zip Code)	A58		
For further information	on concerning this matter, please	call:	一方の 一		
Charle	otte Gass	at (904) 237-588	PH 1: 18		
(Na	ne of Person)	(Area Code & Daytime T			
Enclosed is a check	for the following amount:				
✓ \$125.00 Filing Fe	e \$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 Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:				
•	<u>-</u>	inment Productions, LLC		
(Must end with	the words "Limited Liability Com	pany, "Limited Company" or their abbreviation "LLC,"	' or "L.C.,")	
ADTICI E	II - Address:			
		ss of the principal office of the Limited Lia	ability Company is:	
THE HIGHING	address and street address	ss of the principal office of the Emilion En	ability Company is.	
<u>Principal C</u>	Office Address:	Mailing Address:		
54383 Ma	ırsh Road	Same		
Callahan,	Florida 32011			
(The Limited L business entity	iability Company cannot serve as a with an active Florida registration and the Florida street address Charlotte Gass 54383 Marsh Roa	ess of the registered agent are: Name		
		City, State, and Zip		
liability registered (statutes r	en named as registered ag company at the place desi agent and agree to act in the elating to the proper and c the obligations of my positi	ent and to accept service of process for the organized in this certificate, I hereby accept the his capacity. I further agree to comply with complete performance of my duties, and I and ion as registered agent as provided for in C	e appointment as the provisions of all n familiar with and	
	Registered Ac	gent'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: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGMR Charlotte Gass 54383 Marsh Road Callahan, Florida 32011 MGMR Charles E. Limbrick, Jr. / c/o Charlotte Gass 54383 Marsh Road Callahan, Florida 32011 (Use attachment if necessary) 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.)

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)