

L09000029554

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500146427275

03/24/09--01028--016 \*\*130.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

09 MAR 24 PM 1:30

FILED

S. HAWKES

MAR 26 2009

EXAMINER

**Catherine Ibold**  
3757 Wexford Hollow Rd E  
Jacksonville, FL 32224

March 23, 2009

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

Re: Wavelength Productions, LLC

To Whom It May Concern:

The enclosed Articles of Organization and fees are submitted for filing the above referenced limited liability corporation.

Please return all correspondence concerning this matter to the following:

Catherine Ibold  
3757 Wexford Hollow Rd E  
Jacksonville, FL 32224

For further information concerning this matter please call: Ms. Ibold at (904) 223-0001.

Enclosed please find a check for One Hundred and Thirty Dollars (\$130.00) for the filing fee and the Certificate of Status.

Thank you for your prompt attention to this matter.

Sincerely yours,



Catherine Buhaly Ibold

enclosures

**ARTICLES OF ORGANIZATION**  
**FOR**  
***Wavelength Productions, LLC***

---

**ARTICLE I**  
**Name**

The name of the Limited Liability Corporation is:

**WAVELENGTH PRODUCTIONS, LLC**

**ARTICLE II**  
**Address**

The mailing address and street address of the principal office of WAVELENGTH PRODUCTIONS, LLC (the "Limited Liability Company") the Limited Liability Company is:


Wavelength Productions, LLC  
c/o Catherine Ibold  
3757 Wexford Hollow Rd E  
Jacksonville, FL 32224

**ARTICLE III**  
**Registered Agent, Registered Office, & Registered Agent's Signature**

The name and the Florida street address of the registered agent are:

Catherine Ibold  
3757 Wexford Hollow Rd E  
Jacksonville, FL 32224

*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 related to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..*

  
Catherine Ibold

**FILED**  
09 MAR 24 PM 1:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*ARTICLE IV*  
Manager

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

Catherine Ibold, MGRM.

3757 Wexford Hollow Rd E  
Jacksonville, FL 32224

*ARTICLE V*  
Effective Date

The effective date of these Articles of Incorporation for Florida Limited Liability Corporation shall be March 23, 2009.



Signed: Catherine Ibold  
Authorized Representative and  
Managing Member

FILED  
09 MAR 24 PM 1:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA