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COVER LETTER

то:	Registration Secti Division of Corpo		23.2	
SUBJ	ECT:		k Music Ministries, LLO	<u>C</u>
		rume or Billi	ed Endomy Company	
The en	nclosed Articles of Or	ganization and fee(s) are	submitted for filing.	
Please	return all correspond	ence concerning this mat	ter to the following:	
		Ge	orge L. Metcalfe	
			Name of Person	
				7
			Firm/Company	2010 JAN SEGRETA
		109 Court	5th Stroot Suito 212	
108 South 5th Street, Suite 212 Address				2
				19 PM
		Cı	ty/State and Zip Code	- SAIF 7
		E-mail address: (to be used	for future annual report notification)	
For fu	rther information con	cerning this matter, pleas	e call:	
	Leticia Vazqu		at (<u>954</u>) <u>260 - 6</u> Area Code & Daytime Tel	SYFY ephone Number
			·	•
Enclo	sed is a check for th	e following amount:	•	
] \$125		\$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	Street/Courier Address	1
		Registration Section Division of Corporations	Registration Section Division of Corporation	ns
	P	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center	Circle
	'	ananassee, rt. 52514	Tallahassee, FL 32301	Choic

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	is:
Mill Creek Music (Must end with the words "Limited L	Ministries, LLC iability Company," "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
108 South 5th Street, Suite 212 Leesburg, Florida 34748	108 South 5th Street, Suite 212 Leesburg, Florida 34748
	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or grouper ne registered agent are:
The name and the Florida street address of the	ne registered agent are:
George i	L. Metcalfe 용한 및 🔘
Na	me A 7
· · · · · · · · · · · · · · · · · · ·	Street, Suite 212
Florida street address (F	P.O. Box NOT acceptable)
Leesburg, Florida 347 City, State	748 FL e, and Zip
liability company at the place designated i registered agent and agree to act in this capa statutes relating to the proper and complete	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and existented agent as provided for in Chapter 608. F.S.

(CONTINUED)

Page 1 of 2

The name and address of each Manage	The name and address of each Manager or Managing Member is as follows:				
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	JAN 19 P RETARY O AHASSEE			
Leticia Vazquez Metcalfe, MFR.	108 South 5th Street, Suite 212 Leesburg, Florida 34748	PH 3: 12 OF STATE E.FLORIDA			
George L. Metcalfe, MFRM	108 South 5th Street, Suite 212 Leesburg, Florida 34748				
					
					
(Use attachment if necessary)	* * * * * * * * * * * * * * * * * * *				
ARTICLE V: Effective date, if other than the da (If an effective date is listed, the date must be s to or 90 days after the date of filing.) REQUIRED SIGNATURE:		OPTIONAL) siness days prior			
	172019				
Signature of a member of	or an authorized representative of a member.				
(In accordance with section of this document constituent that the facts stated herein	on 608.408(3), Florida Statutes, the execution ites an affirmation under the penalties of perjury n are true.)				
Typed Filing Fees:	d or printed name of signee				
\$125.00 Filing Fee for Articles of Organiz of Registered Agent	zation and Designation				