Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : SHAPIRO & ADAMS, P.A.

Account Number : I19990000101 Phone : (561)691-0059

Fax Number : (561) 691-0066

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: james @ widescreenmedia com

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SECRETARY OF STATE

## FLORIDA LIMITED LIABILITY CO. Cinema Advertising Group LLC

| Certificate of Status | 0        |
|-----------------------|----------|
| Certified Copy        | 0        |
| Page Count            | 02       |
| Estimated Charge      | \$125.00 |

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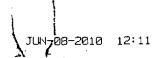
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EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help



| ARTICLES OF ORGANIZATION FOR  | FLORIDA LIMITED LIABILITY C                           | OMPANY       |
|---|---|--------------|
| ARTICLE I - Name: The name of the Limited Liability Company is  | is:   |              |
| Cinema Advertising Group LLC  |   |              |
| (Must end with the words "Limited Lis   | ibility Company, "L.L.C.," or "LLC.")                 | <del>_</del> |
| ARTICLE II - Address: The mailing address and street address of the Principal Office Address:   |   | Company is:  |
| 3826 Beresford Road East  | 3826 Beresford Road East                              |              |
| West Palm Beach, FL 33417   | West Palm Beach, FL 33417                             |              |
| ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Registeres entity with an active Florida registration.)  The name and the Florida street address of the | gistered Agant, You must designate an individual or a | mure: of     |
| James C. Erickson   |   |              |
| Names C. Effectson  | 16  |              |
| 3826 Beresford Roa  | d East  |              |

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.

City, State, and Zip

FL 33417

Registered Agent's Signature (REQUIRED)

West Palm Beach

(CONTINUED)
Page I of 2

| ARTICLE IV- Manager(s) or Managing Member(s | ) or Managing Member(8): |
|---|--------------------------|
|---|--------------------------|

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

| Title: "MGR" = Manager   | Name and Address:  |                 |
|--|--|-----------------|
| "MGRM" = Managing Member   |  |                 |
| MGR  | James C. Erickson  | _               |
|  | 3826 Beresford Road East   | _               |
|  | West Patrn Beach, Ft. 33417  | _               |
|  |  |                 |
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| (Use attachment if necessary)  | DRI DRI  | <i>₩</i>        |
|  | om 5   | ~ `             |
| ARTICLE V: Effective date, if other than the date  |  |                 |
| (If an effective date is listed, the date must be spe<br>to or 90 days after the date of filing.)  | ecific and cannot be more than five business   | days prior      |
| Ţ,   |  |                 |
| REQUIRED SIGNATURE:  |  |                 |
|  |  |                 |
|  | <u> </u>   |                 |
| 1 cerner   | The state of the s |                 |
| Signature of a member or   | an authorized representative of a member.  |                 |
| (In accordance with section of this document constitutes that the facts stated herein a  | 608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury re true.)  |                 |
|  | c. Erickson  |                 |
| Typed o  | or printed name of signes  |                 |

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)

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