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(Requestor's Name)						
(Address)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
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SECRETARY OF STATE

COVER LETTER

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TO:	Registration S Division of Co			
SUBJE	ост: <u>Я</u>	Hudio 2 Name of Lim	DQ LLC inted Liability Company	
The en	closed Articles o	f Organization and fee(s) ar	e submitted for filing.	
Please	return all corresp	ondence concerning this ma	atter to the following:	
	CV	arles M.	701bert	
	St.	ndio 202	Firm/Company	
	293	D Dkeece	hobee Bhd.	#202
	West	t Palm B	Edy FC 33	3409
	c3t	$\langle \cdot \rangle$	music Com I for future annual report notification)	
For fur	ther information	concerning this matter, plea	se call:	
	Harks Name	Tolber+	at (<u>9)7</u>) <u>495</u> Area Code & Daytime Tele	4553
Enclos	ed is a check fo	or the following amount:		
3 \$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



June 30, 2010

CHARLEST M. TOLBERT 2930 OKEECHOBEE BLVD., #202 WEST PALM BEACH, FL 33409

SUBJECT: STUDIO 202 LLC Ref. Number: W10000031139

We have received your document for STUDIO 202 LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document.

Chapter 608, Florida Statutes, does not allow limited liability companies to issue shares or stock. Consequently, limited liability company documents cannot contain any references/terms which may implicate otherwise. Please delete any references to terms such as "shares," "stock," "stockholders," "shareholders" or the like from your document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan Regulatory Specialist II

Letter Number: 410A00016008

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Studio 202 LLC	
(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	s:

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

Principal Office Address:	<u>Mail</u>	ling Address:			
2930 Okerchober ;	Bhal -	< Same			
Nest Palm BCh, FC	33409				
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 and business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Charles Tablett Name 2930 Phetechobel Bwd #2007 Florida street address (P.O. Box NOT acceptable)					
-0001	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)

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: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member (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

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury