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Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Kan-du Productions, LLC Name of Limited Liability Company	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Sandra L. Ferretti Name of Person	
Kan-du Productions, LLC	
180 Cyprass Chib Dr #813	
Pompano Beach FL 33060 City/State and Zip Code Sm (erre Hi @ aol. Com E-mail address: (to be used for future annual report notification)	
City/State and Zip Code Sm (erce Hi @ aol. Com E-mail address: (to be used for future annual report notification)	
The state of the s	المنا
(mig):	gameen.
Sandra Ferre Hi at (954) 783-0161 2 No. Name of Person Area Code & Daytime Telephone Number	*au
Enclosed is a check for the following amount:	
125.00 Filing Fee & Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address Street/Courier Address	

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Compa	ny is:
Kan-du (Must end with the words "Limite	Productions, LLC d 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:
Principal Office Address:	Mailing Address:
ARTICLE III - Registered Agent, Regi	180 Cypiecs Club Dr #813 180 Cypiecs Club Dr #813 180 Pampano Beach, EL 33060 Stered Office, & Registered Agent's Signature: In Registered Agent. You must designate an individual or another
180 Cypr Florida str	f the registered agent are: L. Ferretti Name All Strain All Stra
Having been named as registered agent a	nd to accept service of process for the above stated limited

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR.	Sandra L. Ferretti 180 Cypiers Club Dr #813 Dominion Bel El 33Vac
MGR	Doring C. Ferretti 231 Richmond E Deerfield Beach, FL 33442
	28 19 AUG
(Use attachment if necessary)	ASSEC FLOO
CLE V: Effective date, if other than the effective date is listed, the date must b 0 days after the date of filing.)	market in the second of the se
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.)

Sandra L. Ferretti 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)