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(Req	uestor's Name)	
(Add	ress)	
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COVER LETTER

TO:	Registration and Division of C							
SUBJ	ECT: VOTC	Promotions and Enterta	inment, LLC.					
		Name of Limi	led Liability Con	прану				
The e	nclosed Articles o	of Organization and fee(s) are	submitted for fil	ing.				
Please	return all corres	pondence concerning this mat	tter to the followi	ing:				
	Coral Suther	and						
			Name of Person					
	VOTC Promo	otions and Entertainment						
			Firm/Company					
	3462 NW 110	Oth Way						
			Address			A	6 27	
	Coral Springs	, FI 33065				A 14 E E E E E E E E E E E E E E E E E E	SEP	enny E
		Cit	ty/State and Zip Co	ode		600 (1) 101 - (1)	-2	e recur Street
	VOTCPromo(Lay Ope	-0	_ ;
		E-mail address: (to be used	for future annual re	port notification	n)		- E	\$.44.20
For fu	rther information	concerning this matter, please	e call:	,			15:41	No. 12 P
Cora	Sutherland		at (954	753-966	88			
	Name	of Person	Area Co	de & Daytime T	Telephone Number	er		
Enclo	sed is a check for	or the following amount:						
□\$125	.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Fil Certified C (additional or	_	S160.00 F Certificat Certified (additional	e of Stati Copy	us &	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registr Divisio Clifton 2661 E	Courier Address ation Section on of Corporation Building executive Center assee, FL 32301	ons er Circle			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

VOTC Promotions					
(Must e	end with the words "Limit	ted Liability Company, "L.L.C.," or "LLC.")			
ARTICLE II - Addr	ress:		,, ,	2	
The mailing address a	and street address o	f the principal office of the Limite	d Liability.Co	ompany	y is
Principal Office Add	dress:	Mailing Address:	is in the second	SEP -	tr.
3462 NW 110th Way		3462 NW 110th Way	\$1.50 \$1.50	2	į
Coral Springs, FL 33065		Coral Springs, FL 33065	1 10	7	7
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	• • • • • • • • • • • • • • • • • • • •		<u> </u>	ان ان	7
(The Limited Liability Computer business entity with an activation of the Plo	pany cannot serve as its ovive Florida registration.) orida street address	istered Office, & Registered Ago wn Registered Agent. You must designate an of the registered agent are:	ent's Signatu	75 4- 1 re:	↓
(The Limited Liability Computer business entity with an activation of the Plo	pany cannot serve as its ovive Florida registration.)	wn Registered Agent. You must designate an	ent's Signatu	75 4- 1 re:	* # # # # # # # # # # # # # # # # # # #
(The Limited Liability Computer business entity with an action of the name and the Flo	pany cannot serve as its ovive Florida registration.) orida street address	wn Registered Agent. You must designate an of the registered agent are: Name	ent's Signatu	75 4- 1 re:	* 77 * * * * * * * * * * * * * * * * *
(The Limited Liability Computer business entity with an action of the name and the Flo	pany cannot serve as its ovive Florida registration.) orida street address of coral Sutherland 462 NW 110th Wa	wn Registered Agent. You must designate an of the registered agent are: Name	ent's Signatu individual or anot	75 4- 1 re:	* ??
(The Limited Liability Computation of the Liability Computatio	pany cannot serve as its ovive Florida registration.) orida street address of coral Sutherland 462 NW 110th Wa	wn Registered Agent. You must designate an of the registered agent are: Name	ent's Signatu individual or anot	75 4- 1 re:	* ?? * *

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 Memb	Name and Address:	Zela SE
MGR	Coral Sutherland	The Commonweal Commonw
	3462 NW 110th Way	25.0
	Coral Springs, FI 33065	me, -0 [1]
		72. 5
MGR	Davin Sutherland	2
	1255 Evergreen Trail	
	Lithonia, Ga 30058	<i>F</i>
(Use attachment if necessary) ARTICLE V: Effective date, if other to	han the date of filing:	(OPTIONAL)
(If an effective date is listed, the date to or 90 days after the date of filing.) REQUIRED SIGNATURE:	must be specific and cannot be more the	an five business days prior
Signature of a (In accordance of this docume that the facts s	Sufficient an authorized representative of a member or an authorized representative of a with section 608.408(3), Florida Statutes, the extent constitutes an affirmation under the penalties stated herein are true.) Left ERLAND Typed or printed name of signee	xecution

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)