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K. SALY EXAMINER NOV 2 2010

# **COVER LETTER**

	Registratio Division of	n Section Corporations		
SUBJEC	CT: <u>V</u> I	LLAIN MEDIA GROUF Name of Limite	LLC ed Liability Company	·
The encl	osed Article	s of Organization and fee(s) are s	submitted for filing.	
Please re	turn all con	espondence concerning this matt	er to the following:	
_	STEPHE	N KAISER		
			Name of Person	
_	VILLAI	N MEDIA GROUP LLC		
			Firm/Company	,
	6965 J	ULIA CREEK GARDEN		
			Address	
_	COCONU	T CREEK, FLORIDA	33073	
	0)==		y/State and Zip Code	
	skaise	r@gmail.com E-mail address: (to be used f	or future annual report notification)	
For furth	er informati	on concerning this matter, please	call:	
STEPH	HEN KAI	SER	at ( 561 ) 254-562	20
	Na	me of Person	Area Code & Daytime Telep	phone Number
Enclose	d is a checl	k for the following amount:		
\$125.00 I	Filing Fee	x \$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/Courler Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	RT	ΓT	CI	Æ	I	. I	V	9 T	n	e	•

The name of the Limited Liability Company is:

VILLAIN	MEDIA	GROUP	LLC
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(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:

#### **Principal Office Address:**

### **Mailing Address:**

6965 Ju	<u>lia Gar</u>	dens Dr	ive
Coconut	Creek,		la
		33073	

6965	Jul	lia	Cre	ek	$\mathtt{Dr}$	ive
Cocor	ıut	Cre	ek,	F	Lor	ida
•				3	307	3

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 another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

STEPHEN KAISER

Name

6965 JULIA CREEK GARDENS DRIVE

Florida street address (P.O. Box NOT acceptable)

COCONUT CREEK FL 33073

City, State, and Zip

10 NOV -2 AM 12: 28

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 agreeistered 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> </u>	Name and Address:
'MGR = Manager 'MGRM" = Managing Men	nber
MGRM	STEPHEN KAISER 6965 Juila Gardens Drive
	Coconut Creek, Florida 33073
	<del></del>
Use attachment if necessary	·)
·	,
LE V: Effective date, if othe ective date is listed, the date	r than the date of filing: (OPTION e must be specific and cannot be more than five business da
LE V: Effective date, if othe ective date is listed, the date	r than the date of filing: (OPTION e must be specific and cannot be more than five business da
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LE V: Effective date, if othe ective date is listed, the date days after the date of filing REQUIRED SIGNATURE	r than the date of filing: (OPTION e must be specific and cannot be more than five business da
LE V: Effective date, if othe ective date is listed, the date days after the date of filing EEOUIRED SIGNATURE  Signature o  (In accordance with a constitutes an affirm I am aware that any	r than the date of filing: (OPTION to must be specific and cannot be more than five business date)

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)