

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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## FLORIDA LIMITED LIABILITY CO. **OUTERSCOPE RECORDS LLC**

Certificate of Status 0 Certified Copy 1 Page Count 03 **Estimated Charge** 

\$155.00

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Corporate Filing Menu

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RETICLES OF ORGANIZATION FOR	FLORIDA LIMITED LIABII	LITY CUMPAN	IX.
ARTICLE I - Name: The name of the Limited Liability Company	y is:		
(Must ond with the words "Limited L	Liability Company, "L.L.C.," or "LLC.")	ds 11	16
ARTICLE II - Address: The mailing address and street address of th	ne principal office of the Limited I	Liability Company	is:
Principal Office Address:	Mailing Address:	. • • •	,
4515W66th AVE	SAME	· · · · · · · · · · · · · · · · · · ·	
MIAMI, FZ 55144		F 2 2	
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own business antity with an active Florida registration.)	Registered Agent. You must designate an ind	t's Signature: lividual or mother	·
The name and the Florida street address of	UERVO	SE CRE ALLAH	10 NOV
4515W 66	Varne	ASSEE	o i
Miami	et address (P.O. Box NOT acceptable)  PL 33   44  Itate, and Zip	. FLORIDA	AHII: 50
Having been named as registered agent an liability company at the place designated	nd to accept service of process for the distribution of the distri	he above stated lim t the appointment a	ited .

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)
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ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: 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. (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 time; I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation 50 of Registered Agent \$ 30.00 Certified Copy (Optional)

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5 5.00 Certificate of Status (Optional)