## L10000120947

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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2010 NOV 19 PH 1: 36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. SAULSBERRY EXAMINER NOV 2 2 2010

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: RHIZOME CAPITAL, I	L <b>LC</b>	
	ted Liability Company	<del>are and a disco</del>
The enclosed Articles of Organization and fee(s) are	submitted for filing.	
Please return all correspondence concerning this mat	tter to the following:	
Kjell Larsson		
	Name of Person	
Kemp Entertainment, Inc		
	Firm/Company	
14 Palm Harbor Village Wa	ay <u>.</u>	<del>-</del>
	Address	
Palm Coast, FL 32137		NOV 19
Ci	ity/State and Zip Code	(2) 5 F
larsson@bellsouth.net	Ţ	<sup>™</sup> ੜ੍ਹ <b>ਾ</b>
E-mail address: (to be used	for future annual report notification)	
For further information concerning this matter, pleas	se call:	1 : 36
Kjell G Larsson	at ( 386 ) 986-1600 x 204	
Name of Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:		
]\$125.00 Filing Fee \$\times 130.00 Filing Fee \$\times \text{Certificate of Status}\$	\$155.00 Filing Fee & \$160.00 Fili Certified Copy (additional copy is enclosed)  Certified Co (additional copy	of Status & opy
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	

## **ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

MGRM	Kemp Entertainment, Inc 14 Palm Harbor Village Way Palm Coast, FL 32137		
MGRM	Breakaway Entertainment		
	201-754 Broughton Street Victoria, BC, V8W 1E1 CANADA		
MGM	Kjell G Larsson	<u>व्य</u>	2
	14 Palm Harbor Village Way Palm Coast, FL 32137		6 I AON 0102
MGM	Andreas Thatcher	ASSIT	6 I A
	201-754 Broughton Street Victoria, BC, V8W 1E1 CANADA		Ρĭ
(Use attachment if necessary)		ORIDA ORIDA	1:36
LE V: Effective date, if other than th	-	(OPTIO	
ffective date is listed, the date must days after the date of filing.)	be specific and cannot be more than fi	ve business c	lays

Signature of a member or an authorized representative of a member.

(In accordance with section 604.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

Kjell G Larsson
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)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

RHIZOME CAPITAL, LLC					
<u> </u>	mited Liability Company, "L.L.C.," or "LLC.")				
ARTICLE II - Address:					
	of the principal office of the Limited Liability Company is				
Principal Office Address:	Mailing Address:				
14 Palm Harbor village Way	14 Palm Harbor Village Way				
Palm Coast, FL 32137	Palm Coast, FL 32137				

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

Kjell G Larsson

Name

14 Palm Harbor Village Way

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

Palm Coast

FL 32137 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..

Agent's Signature (REQUIRED)

(CONTINUED)

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