

L10000B/605

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(City/State/Zip/Phone #)

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12/27/10--01043--004 **160.00

Effective Date

01/01/11

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 DEC 27 AM 10:12

T. HAMPTON

DEC 28 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CHAGSTAG STUDIOS, 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:

SARAH SAMSTAG
Name of Person

CHAGSTAG STUDIOS, LLC.
Firm/Company

9412 CANDICE Ct.
Address

ORLANDO, FL 32832
City/State and Zip Code

Sarahsam22@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JACKIE FREDIANI at (321) 377-3086
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$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/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

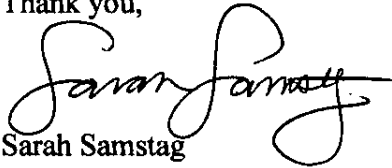
December 20th, 2010

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

We have enclosed the required Articles of Organization along with the check for the filing fee for our Limited Liability Company, ChagStag Studios. We would also like to add Jackie Frediani's (formerly Chagnon) newly acquired Florida License number to our original paperwork. Her license number is ID5812. Please let us know if you need additional information at this time.

Thank you,

A handwritten signature in black ink, appearing to read 'Sarah Samstag', with a stylized flourish at the end.

Sarah Samstag
9412 Candice CT
Orlando, FL 32832
Cell: 407-953-9380
(Former cell number on original
paperwork was 419-656-1053)

Effective Date 01/01/11

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CHAGSTAG STUDIOS, LLC.

(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:

SARAH SAMSTAG
9412 CANDICE CT.
ORLANDO, FL 32832

Mailing Address:

CHAGSTAG STUDIOS, LLC.
P.O. BOX 54-71696
ORLANDO, FL 32834-71696

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:

SARAH SAMSTAG

Name

9412 CANDICE CT.

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

ORLANDO, FL 32832

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..


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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

JACKIE FREDIANI (FORMERLY CHAGNON)
522 W. PAR ST.
ORLANDO, FL 32804

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: JANUARY 1ST, 2011. (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:

Jackie Frediani

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. 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.)

Jackie Frediani

Typed or printed name of signer

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)

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