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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

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SECRETARY OF STATE
OIVISION OF CORPORATIONS

T. HAMPTON

JAN 19 2011

EXAMPLES

COVER LETTER

. то:	Registration Section Division of Corporations	
SUBJE	CT: Butterfly Effect Media, LLC Name of Limited Liability Company	
The end	closed Articles of Organization and fee(s) are submitted for filing.	
Please r	return all correspondence concerning this matter to the following:	
	Cyrthia Nicolosi	
-	Butterfly Effect Media, LLC	_
	4718 Sw 13th Street	
-	Address	_
	Deerfield Beach, FC 33442	
-	City/State and Zip Code CNI CO O Si a bouls outh of the E-mail address: (to be used for future annual report notification)	
For furt	ther information concerning this matter, please call:	
س	Name of Person at (954) 473-6437 Area Code & Daytime Telephone Number	
Enclos	ed is a check for the following amount:	
\$125.00	Filing Fee \$\int_{\text{\$130.00 Filing Fee & Certificate of Status}}\$\$ Certificate of Status \$\int_{\text{\$certified Copy}}\$\$ (additional copy is enclosed) \$\int_{\text{\$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	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Butterfly Effect Media, UC

(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:
4718 Sw 13th Street Deerfield Beach, FL 33442	same

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:

Cynthia Nicolosi

Name

4718 Sw 13th Street

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

Deerfield Beach FL 33442

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

SECRETARY OF STATE DIVISION OF CORPORATION

'ARTICLE IV- Manager(s) or Managing Member(s):

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

"MGRM" = Managing Member "MGR" Cythia Nicolesi J-TIR S.D. 13th Street Deerfeld Boach, It 33-141 Ashley Crosslin 3324 Peachtree St. NE #1116 Atlanta, 6A 30336 Time Managing Member (Use attachment if necessary) FICLE V: Effective date, if other than the date of filing: 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u>Title:</u> "MGR" = Manager	Name and Address:
(Use attachment if necessary) FICLE V: Effective date, if other than the date of filing: 1 1 1 1	"MGRM" = Managing Me	
(Use attachment if necessary) FICLE V: Effective date, if other than the date of filing: 1 1 1 1 (OPTIONAL) In effective date is listed, the date must be specific and cannot be more than five business days presonable of filing.) REQUIRED SIGNATURE: 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.)	MGK	JUMINICIVICOIOSI JUMINICIVICOIOSI
(Use attachment if necessary) FICLE V: Effective date, if other than the date of filing: 1 1 1 1 (OPTIONAL) In effective date is listed, the date must be specific and cannot be more than five business days presonable of filing.) REQUIRED SIGNATURE: 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.)	1100 / Oo il	veerfield bouch, to 30442
ricle V: Effective date, if other than the date of filing:	"MOKIN"	3324 Speachtree St. NE#1116
ricle V: Effective date, if other than the date of filing:		
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ICLE V: Effective date, if other than the date of filing:		
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.)		
(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.)	FICLE V: Effective date, if oth neffective date is listed, the date	ner than the date of filing: 1 1 1 1 (OPTIONAL) ate must be specific and cannot be more than five business days pr
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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.)	FICLE V: Effective date, if oth n effective date is listed, the date 90 days after the date of filing REQUIRED SIGNATUR	ter than the date of filing: (OPTIONAL) ate must be specific and cannot be more than five business days prig.) EE: Mac Wicology
Cunthia Nicolosi = 5	FICLE V: Effective date, if oth n effective date is listed, the date 90 days after the date of filing REQUIRED SIGNATUR Signature	ter than the date of filing:
1 typed or printed name of signee	ricle V: Effective date, if other neffective date is listed, the date 90 days after the date of filing recordance with constitutes an affir I am aware that any	der than the date of filing:
	ricle V: Effective date, if other neffective date is listed, the date 90 days after the date of filing recordance with constitutes an affir I am aware that any	der than the date of filing:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)