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(Requestor's Name)				
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Certified Copies Certificates of Status				
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Special Instructions to Filing Officer:

A. LUNT

FEB 10 2010

EXAMINER

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COVER LETTER

TQ:	Registration Section Division of Corporations			
SUBJI	ECT:	6 lobal Mu	sic Mafia	LLC
,5000		Name of Limited L	iability Company	+
The en	closed Articles of	Organization and fee(s) are subn	nitted for filing.	
Please	return all correspo	ondence concerning this matter to	the following:	
		Scott Oles	en	
			ne of Person	
•				
		Fire	n/Company	FA E
	1	Sarasota, City/Sta Global Music E-mail address: (to be used for fu	et Way	# 1008 PH C
			Address	500 60
		Sarasota,	FL 3423	2 FEET PR
		City/Sta	te and Zip Code	25 Reference
		E-mail address: (to be used for fu	M9 f 19 (© GM ture annual report notification)	1911 · COM
For fur		concerning this matter, please call		
	Scott	Olesen at	(941) 321	-0514
	Name o	of Person	Area Code & Daytime Tele	phone Number
Enclos	sed is a check for	r the following amount:		
\$125.00	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 C	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is: **ARTICLE II - Address:** The mailing address and street address of the principal office of the Limited Liability Company is: **Principal Office Address: Mailing Address:** 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: Joshua Acevedo Name 2464 Britannia Rd Florida street address (P.O. Box NOT acceptable) Sarasota FL 34231 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

egistered 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

ARTICLE IV- Manager(s) or Manager. The name and address of each Manager.				
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
MER	Scott Olesen 1818 Parakeet Way #100 Surasota, FC 34232			
MGR	Chris Sciesinski 1818 Parakeet Way #1001 Sgrasota, FL 34232			
	TOTAL LAND BY THE B-8			
(Use attachment if necessary)	FILDRIDA 25			
ARTICLE V: Effective date, if other than the da (If an effective date is listed, the date must be s to or 90 days after the date of filing.)	the of filing: (OPTIONAL) specific and cannot be more than five business days prior			
REQUIRED SIGNATURE:				
Sco	at ale			
Signature of a member or an authorized representative of a member.				
constitutes an affirmation under the	08(3), Florida Statutes, the execution of this document are penalties of perjury that the facts stated herein are true. It is too submitted in a document to the Department of State is provided for in s.817.155, F.S.)			
Scs # Olesen Typed or printed name of signee				
туре	a or printed name of signee			
Filing Fees:				
\$125.00 Filing Fee for Articles of Organiz	zation and Designation			

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)