02/15/2011 17: vision of Corporations



Florida Department of State Division of Corporations

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To:

Division of Corporations

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FEB 17 2011

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Account Name : LAZARUS CORPORATE FILT

Account Number : I20000000019 Phone : (305)552-5973

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## FLORIDA LIMITED LIABILITY CO. SPACE CABBAGE DOCUMENTARIES LLC

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ARTICL	LES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY	
	LE I - Name: le of the Limited Liability Company is:	
Sp	Must and with the Words "Limited Liability Company, "L.L.C." or "LLC."	
	LE II - Address: ling address and street address of the principal office of the Limited Liability Company is	:
Principal	al Office Address: Mailing Address;	
1 14 (	6 Scottview Lane 5845 Branner Qual 3 md Fl, 23815 Interf. 33813	'سه
(The Limited business en	LE III - Registered Agent, Registered Office, & Registered Agent's Signature: ad Liability Company cannot serve as its own Registered Agent. You must designate an individual or another unity with an active Plonda registerion.)  the and the Florida street address of the registered agent are:	
	Vie. Ce Waren	
	Vieire trances	
	55 16 Scott View lane	
	Name  55 16 56-4 Vire   CAC  Florida street address (P.O. Box NOT acceptable)	
	55 16 Scott View lane	
Having liabil registere statutes	Namo  55 16 Sept Virw lone  Florida street address (P.O. Box NOT acceptable)  1 akeland FL 73 813	
Having liabil registere statutes	Name    State   State	
Having liabil registere statutes	Name    State   View   CAL     Florida street address (P.O. Box NOT acceptable)   Lake   May   Ft   33 8 19     City, State, and Zip     been named as registered agent and to accept service of process for the above stated limited lity company at the place designated in this certificate, I hereby accept the appointment as sed agent and agree to act in this capacity. I further agree to comply with the provisions of all as relating to the proper and complete performance of my duties, and I am familiar with and agent the obligations of my position as registered agent as provided for in Chapter 608, F.S	
Having liabil registere statutes	Name    State   State	
Having liabil registere statutes	Name    State   View   CAL     Florida street address (P.O. Box NOT acceptable)   Lake   May   Ft   33 8 19     City, State, and Zip     been named as registered agent and to accept service of process for the above stated limited lity company at the place designated in this certificate, I hereby accept the appointment as sed agent and agree to act in this capacity. I further agree to comply with the provisions of all as relating to the proper and complete performance of my duties, and I am familiar with and agent the obligations of my position as registered agent as provided for in Chapter 608, F.S	

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## H11000041014

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

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 2-9-201 (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 of 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 porjury 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.)

Pielle Franco
Typed or printed name of signes

## 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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