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SECRETARY OF STATE

D. BRUCE

MAR 25 2011

EXAMINER

COVER LETTER

TO		on Section Corporations		
SL	BJECT: STU	JDIO 3030 LLC		
		Name of Limit	ted Liability Company	
Th	e enclosed Article	es of Organization and fee(s) are	submitted for filing.	
Ple	ease return all corr	respondence concerning this mat	ter to the following:	
	Tate J.	Sned		
			Name of Person	
	c/o WIL	LIAM H. SNED, JF		
			Firm/Company	
	3030 S	. Dixie Highway, Su	ite 5	
			Address	75
	West Pal	m Beach, FL 33405	-1539	AS BE
			ty/State and Zip Code	AR 24 HASSI
	wsned@s	snedpruitt.com E-mail address: (to be used	for future annual report notification)	
Fo	r further informati	on concerning this matter, pleas		OF SIAN
Jo	oyce Blake		_{at (} 561 ₎ 655-8631, E	
	Na	me of Person	Area Code & Daytime Teleph	one Number
En	closed is a check	k for the following amount:		
\$12	5.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	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 Cir Tallahassee, FL 32301	cle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	R	Г	I	C	L	E	I	-	ľ	V	a	n	16	
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The name of the Limited Liability Company is:

STUDIO 3030 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:

Mailing Address:

3030 S. Dixie Highway, Suite 5 WEST PALM BEACH, FL 33405 3030 S. Dixie Highway, Suite 5 WEST PALM BEACH, FL 33405

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 occupants.)

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual gentle business entity with an active Florida registration.)

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

TATE J. SNED

Name

3030 S. Dixie Highway, Suite 5

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

West Palm Beach 33405 FL 33405

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)

Page 1 of 2

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

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

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MORINI — Managing Member	
MGRM	Tate J. Sned
	3030 S. Dixie Highway, Suite 5
	West Palm Beach, FL 33405-1539
MGR	Tate J. Sned
	3030 S. Dixie Highway, Suite 5
	West Palm Beach, FL 33405-1539
<u> </u>	
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than a (If an effective date is listed, the date mus to or 90 days after the date of filing.)	the date of filing: (OPTIONAL) t be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Signature of a men	nber or an authorized representative of a member.
constitutes an affirmation un I am aware that any false in constitutes a third degree fe	608.408(3), Florida Statutes, the execution of this documents ander the penalties of perjury that the facts stated herein are true, formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.)
TATE J. SN	
	Typed or printed name of signee
Filing Fees:	DA DA
	

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

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