L11000048101

(1	Requestor's Name)	•
(4	Address)	
(,	Address)	***************************************
(0	City/State/Zip/Phone	e #)
· PICK-UP	WAIT	MAIL
• (E	Business Entity Nam	ne)
3)	Document Number)	
Certified Copies	Certificates	of Status

Special Instructions to Filing Officer:

A. LUNT

APR 22 2010

EXAMINER

Office Use Only



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04/21/11--01031--003 **155.00



COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJE	ECT: Action Figures Model & Talent Agency Name of Limited Liability Company	
The enc	nclosed Articles of Organization and fee(s) are submitted for filing.	
Please r	return all correspondence concerning this matter to the following:	
-	Eugene Gamble JR. Name of Person	
-	Action Figures Model & Talent Agency Arm Prim/Company	 T
_	4440 SW ARCHER Rd. Apt. 2408 Z	
-	Gainesville, FL 32608 City/State and Zip Code	
_	E-mail address: (to be used for future annual report notification)	-
For furtl	ther information concerning this matter, please call:	
EU	Agene Gamble JR. at (352) 642-5247 Name of Person Area Code & Daytime Telephone Number	
	sed is a check for the following amount: Filing Fee \$\sum_{\text{S130.00 Filing Fee & Certificate of Status}}} \square \square \square_{\text{S155.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)}} \square \square \text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}}	
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

L.L.C., or "LLC.")	ALCOHOL: NA
21 SSE	
고 ·	
SW Archer Rd Apt 2608	
32608	
	Address: SW Archer Rd Apt 2608

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

business entity with an active Florida registration.)

Morgan White

Name

444 SW ARCher Rd. Apt. 2008

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

Gainesville FL 32608

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

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	,
MGR	Morgan White
	4440 SIN ARCHER Rd. Apt. 260 Gaines VIIIE, FL 32608
MGRM	Rnger Smith
	1070 SW 11th St. F.
	Fugene Gamble DR.
MGR	Eugene Gamble DR. 822 2
	4440 SW ARCHER Rd. Apt 2100
	Gainesville, FL 32608
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,	
Use attachment if necessary)	· · · · · · · · · · · · · · · · · · ·
•	the date of filing: (OPTION.
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LE V: Effective date, if other than	n the date of filing: (OPTION) set be specific and cannot be more than five business da
LE V: Effective date, if other than ective date is listed, the date mudays after the date of filing.)	
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EV: Effective date, if other than ective date is listed, the date mu days after the date of filing.)	
LE V: Effective date, if other than ective date is listed, the date mudays after the date of filing.) REQUIRED SIGNATURE:	est be specific and cannot be more than five business da
LE V: Effective date, if other than ective date is listed, the date mudays after the date of filing.) REQUIRED SIGNATURE: Signature of a me	ember or an authorized representative of a member.
LE V: Effective date, if other than fective date is listed, the date mudays after the date of filing.) REQUIRED SIGNATURE: Signature of a me (In accordance with section constitutes an affirmation to	ember or an authorized representative of a member. 108.408(3), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true.
LE V: Effective date, if other than ective date is listed, the date mudays after the date of filing.) REQUIRED SIGNATURE: Signature of a median and a median an	ember or an authorized representative of a member. 108.408(3), Florida Statutes, the execution of this document

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation

Filing Fees:

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