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Office Use Only



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Effective Date 4/24/11

T. HAMPTON

APR 2 2 2011

EXAMINER

CUVER LETTER

•	Division of Corporations
	SUBJECT: Purity Ink. Entertainment, L.L.C. Name of Limited Liability Company
	The enclosed Articles of Organization and fee(s) are submitted for filing.
	Please return all correspondence concerning this matter to the following:
	Annanétha Rickia Mitchell Name of Person Discourse In 1916
•	Please mail back to: P O Box 402932 ———————————————————————————————————
	8040 NW 22nd Avenue
	Miami, FL. 33147 City/State and Zip Code
	E-mail address! (to be used for future annual report notification)
	For further information concerning this matter, please call:
	Annarétha, Rickia Mitchell at (305) 924-8406 Name of Person Area Code & Daytime Telephone Number
	Enclosed is a check for the following amount:
V	\$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

11 APR 21 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

February 25, 2011

ANNANETHA RICKIA MITCHELL P O BOX 402932 MIAMI BEACH, FL 33140

SUBJECT: PURITY INK.ENTERTAINMENT, L.L.C.

Ref. Number: W11000011160

We have received your document for PURITY INK.ENTERTAINMENT, L.L.C. and your check(s) totaling \$250.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on February 24, 2011. Please amend your document accordingly.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 511A00004791

To the Department of the State:

I am releasing my former company's name, Purity Ink Entertainment, L.L.C. (L09000063269), and I have no intentions of reinstating. Thank you for your time.

Sincerely,

Annanetha Mitchell

DIVISION OF CORPORATIONS

11 APR 21 PH 4: 48

Effective Date 4/24/11

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

Pority Ink Entert ourment, L.L.C.
(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:
3080 Nw 22rd Ave	P.O. Box 402932
Miani, Fl 33147	Mioni Beach, FL 33140

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:

Annonétha Rickia Mitchell

Name

8080 NW 22m Ave

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

Mani FL 33147

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

SECRETARY OF STATE
DIVISION OF CORPORATIONS

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

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

<u>Title:</u>	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
Marm	Annanétha Rickia Mikhell 2010 Mas 22nd Hvenix Miami, Fl. 33147
(Use attachment if necessary)	

ARTICLE V: Effective date, if other than the date of filing: ________. (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 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.)

metha Kickia Mitchell

Typed or printed name of signee

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)