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PICK-UP	WAIT	MAIL
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Special Instructions to Filing Officer:

L. SELLERS

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SECRETARY OF STATE ALLAHASSEE, FLORIDA

FILED

COVER LETTER -

TO:	Registration Section Division of Corporations	
SUBJE	CT: Boneygirl Productions	LLC
5000		ited Liability Company
The enc	losed Articles of Organization and fee(s) are	e submitted for filing.
Please r	eturn all correspondence concerning this ma	atter to the following:
1	Mark A Hollamon	
_	Mark / Crionarion	Name of Person
-		Firm/Company
	7622 Country Run Pkwy	
_	, ozz odani, j rkan r kwy	Address
_	Vriando El 22010	
ر	Orlando, FL 32818	ity/State and Zip Code
r	nark@hollamon.com	
_		for future annual report notification)
For furth	ner information concerning this matter, pleas	se cali:
Mark	A Hollamon	_at (407) 580-8608
	Name of Person	Area Code & Daytime Telephone Number
Enclose	d is a check for the following amount:	
\$125.001	Filing Fee \$\int \text{\$130.00 Filing Fee & Certificate of Status}\$	\$155.00 Filing Fee & \$160.00 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 Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ART	CI	E I	I _ 1	Nο	m	Δ
AKII	LL	ar.	- 1	IVA	311	c.

The name of the Limited Liability Company is:

Boneygirl Productions 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:
7622 Country Run Pkwy	7622 Country Run Pkwy
Orlando, FL 32818	Orlando, FL 32818

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:

Mark A Ho	ollamon
	Name
7622 Cd	ountry Run Pkwy
	Florida street address (P.O. Box NOT acceptable)
Orlando	_{FL} 32818
	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

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SECRETARY OF STATE

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Mark A Hollamon 7622 Country Run Pkwy Orlando, FL 32818
(Use attachment if necessary)	
ARTICLE V: Effective date, if other that (If an effective date is listed, the date muto or 90 days after the date of filing.)	ust be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	nember or an authorized representative of a member.
constitutes an affirmation I am aware that any false	on 608.408(3), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.)

Mark A Hollamon

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)