

L11000054038

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

**G. MCLEOD**

MAY - 6 2011

**EXAMINER**



400202967254

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11 MAY - 4 PM 3:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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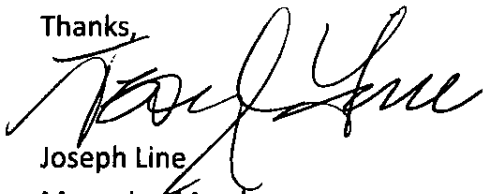
**Joseph E. Line**  
4964 NW 105<sup>th</sup> Dr.  
Coral Springs, FL 33076  
954-298-5014

May 2, 2011  
Florida Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314  
ATTN: Gina McLeod

Ref. Number W11000023391

Attached is an amended Articles of Organization. The new name is: Music & More, LLC. We have also removed two managers from page 2.

Thanks,

A handwritten signature in black ink, appearing to read "Joseph Line", written over the printed name and title.

Joseph Line  
Managing Member

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** The Music Room, LLC  
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:

Joseph Line

Name of Person

Firm/Company

4964 NW 105th Dr.

Address

Coral Springs, FL 33076-1761

City/State and Zip Code

jline888@att.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joseph Line

Name of Person

at ( 954 )

298-5014

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 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**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Music & More 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:**

5242 NW 90th Terrace  
Coral Springs, FL 33067-4616

**Mailing Address:**

5242 NW 90th Terrace  
Coral Springs, FL 33067-4616

**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:

Roy Fantel

Name

5242 NW 90th Terrace

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

Coral Springs FL 33067-4616

City, State, and Zip

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TALLAHASSEE, FLORIDA

*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)

**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

**Name and Address:**

MGRM

Joseph Line

4964 NW 105th Dr.

Coral Springs, FL 33076

MGRM

Roy Fantel

5242 NW 90th Terrace

Coral Springs, FL 33067

MGR

MGR

(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.)

Joseph Line

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)**