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C. LEWIS

JUL 2 1 2011

EXAMINER

" COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJE	ct: Lowdown Media, LLC				
SOBJE	Name of Limited Liability Company				
The enc	losed Articles of Organization and fee(s) are submitted for filing.				
Please r	eturn all correspondence concerning this matter to the following:				
_	LAWRENCE BERGER				
	Name of Person				
LOWDOWN MEDIA					
	Firm/Company				
_	613 TREEHOUSE CIRCLE				
	Address				
_	ST. AUGUSTNE, FL 32095 City/State and Zip Code				
_	City/State and Zip Code				
_	E-mail address: (to be used for future annual report notification)				
For first	ner information concerning this matter, please call:				
	Name of Person at (904) 219-0534 Area Code & Daytime Telephone Number				
	Name of Person Area Code & Daytime Telephone Number				
Enclose	ed is a check for the following amount:				
3125.00	Filing Fee \$\ \times \\$130.00 \text{ Filing Fee & Certificate of Status} \ \times \text{S155.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)} \ \text{Certified Copy (additional copy is enclosed)} \ \ \text{Certified Copy (additional copy is enclosed)} \ \text{Certified Copy (additional copy is enclosed)} \ \ Cer				
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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:	
LOWDOWN MEDI	A, LLC
(Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
613 TREEHOUSE CIRCLE ST. AUGUSTINE, FL 32095	SAME
51. AUGUSIINE, FL 32045	
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.) The name and the Florida street address of the re LAWRENCE Name LOIS TRECHOUSE	red Agent. You must designate an individual pozanother gistered agent are:
Florida street addr	ess or or hox more accentanter
St. AUGUSTINE City, State	FL 32045
Having been named as registered agent and to a liability company at the place designated in th registered agent and agree to act in this capacity, statutes relating to the proper and complete per	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and ered agent as provided for in Chapter 608, F.S

(CONTINUED)

ARTICLE IV- Manager(s) or Man The name and address of each Mana		ollows:
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	2011 JUL 20 A SECRETARY OF TALLAHASSEE.
MGRM	LAWRENCE BE	
HOLM	ST. AUGUSTINE, JONATHAN KAT 4 NASH PLACE	FL 32095

(Use attachment if necessary)		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
LE V: Effective date, if other than the fective date is listed, the date must be days after the date of filing.)		
REQUIRED SIGNATURE:		
Signature of a memb	er or an authorized representative of	s member.
constitutes an affirmation under I am aware that any false infor	8.408(3), Florida Statutes, the execution of the penalties of perjury that the facts mation submitted in a document to the lay as provided for in s.817.155, F.S.)	stated herein are true.

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)

Typed or printed name of signee