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(Requestor's Name)				
(Address)				
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(C	ity/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
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SECRETARY OF STATE ALLAHASSEE, FLORIGA

W11-40442

J. BRYAN

AUG 1 5 2011

EXAMINER

COVER LETTER

TO:

Registration Section

Division of Corporations
SUBJECT: L.O.L Promotions Production & Entertainment Name of Limited Liability Company LLC
Name of Limited Liability Company LLC
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Ober Lus Del Toro Name of Person
L.O.L Promotions Pruductions & Entertainment
13150 NW 6 St.
Miani Pl 33182 PE T
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Ober Lis Del Toro at (786) 306-5950 The Name of Person Area Code & Daytime Telephone Number
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times \text{S130.00 Filing Fee & Certificate of Status}\$ Certificate of Status \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing Address Street/Courier Address Paristration Section Projection Section

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 2, 2011

OBER LUIS DEL TORO L.O.L PROMOTIONS PRODUCTIONS & ENTERTAIN 13150 NW 6 ST MIAMI, FL 33182

SUBJECT: L.O.L PROMOTIONS PRODUCTIONS & ENTERTAINMENT LLC

Ref. Number: W11000040442

We have received your document for L.O.L PROMOTIONS PRODUCTIONS & ENTERTAINMENT LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We didn't receive the 2nd page of application signed,

We are enclosing the proper form(s) with instructions for your convenience.

Please return 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) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 611A00018148

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

L.O.L. Promotions Productions & Entertainment

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

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:
13150 NW 6 st.	13150 NW 6 St
Migni, Fl, 33182	Miani F1, 33182

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:

Ober	كتراح	De	LTOO
	Name	•	
13150	NW	6	57.
Miari	F		ox NOT acceptable)
	/ City, State	, and Zip	

FILED

11 AUG 12 AM 7:56

SECRETARY OF STATE
ALLIAHASSEE, FLORIGE

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)

REQUIRED SIGNATURE:

to or 90 days after the date of filing.)

Signature of a member or an authorized representative of a member.

(If an effective date is listed, the date must be specific and cannot be more than five business days prior

(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.)

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)