## L11000097139

(Requestor's Name)		
(Address)		
,		
(Address)		
(City/State/Zip/Phone #)		
_		
PICK-UP WAIT MA	IL.	
(Business Entity Name)		
(business Entity Name)		
·		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
	•	

Office Use Only



400211228964

08/23/11--01007--031 \*\*130.00

FILED

11 AUG 23 PN 1: 12

SECRETARY OF STATE
ANASSEE, FLORIDA

N. Culling AUG 2 4 2000

## **COVER LETTER**

**Registration Section** 

**Division of Corporations** 

TO:

SUBJECT: BT Productions, LLC	
	d Liability Company
The enclosed Articles of Organization and fee(s) are s	ubmitted for filing.
Please return all correspondence concerning this matter	er to the following:
Benjamin A. Thompson	
	Name of Person
BT Productions, LLC	
	Firm/Company
3905 NW 75th Ter	
	Address
Lauderhill, FL 33319	
City	/State and Zip Code
BThompsonProductions@gmail.com	n
E-mail address: (to be used for	or future annual report notification)
For further information concerning this matter, please	call:
Benjamin Thompson	at (954 ) 288-4016
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\sum \text{Certificate of Status}\$	S155.00 Filing Fee & S160.00 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	Street/Courier Address Registration Section Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability Company is:			
BT Productions, LLC			
(Must end with the words "Limited Liabil	lity Company, "L.L.C.," or "LLC.")	,	
ARTICLE II - Address:			
The mailing address and street address of the pr	rincipal office of the Limited Liability C	ompa	any is:
Principal Office Address:	Mailing Address:		
BT Productions	BT Productions		
3905 NW 75th Ter	3905 NW 75th Ter		
auderhill, FL 33319	Lauderhill, FL 33319	•	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.)  The name and the Florida street address of the registration.	stered Agent. You must designate an individual or and	ure: other AUG 23	<u> </u>
Benjamin A. Thompson	SEE C	ယ်	ILED
Name	Po.	3	O
3905 NW 75th Ter	dress (P.O. Box NOT acceptable)	1:12	
Florida street add	dress (P.O. Box NOT acceptable)	2	
Lauderhill	FL33319		
City, St	ate, 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)

## 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:
MGRM	Benjamin A. Thompson 3905 NW 75th Ter Lauderhill, FL 33319
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the	date of filing: (OPTIONAL) e specific and cannot be more than five business days prio
REQUIRED SIGNATURE:	FILE 11 AUG 23 SECRETARY TALLAHASSE
Be Mul Signature of a member	r or an authorized representative of a member.
constitutes an affirmation under I am aware that any false inform	8.408(3), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true. The mation submitted in a document to the Department of State by as provided for in s.817.155, F.S.)
Benjamin A. Tho	mpson
Ту	ped or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certifled Copy (Optional)
\$ 5.00 Certificate of Status (Optional)