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SECKETARY OF STATE.

T. HAMPTON
SEP 8 0 2011
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: TBSE Music, 22C. 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:
Paul DaviS Name of Person
Tampa Bay Sports and Entertainment LLC
461 Channelside Drive Address
Tampa, FL 33607 City/State and Zip Code
City/State and Zip Code Pdavis @ Sprimes For um . Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Danna Haydar at (8/3) 301 - (845) Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status}\$\$ 130.00 Filing Fee & \text{Certified Copy} & \text
Mailing Address Registration Section Division of Corporations Street/Courier Address Registration Section Division of Corporations

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
TBSE Music, L. (Must end with the words "Limited Liability)	ty 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:	
401 (hannelside Drive Tampa, FL 3.31002	461 Channelside Drive Tampa, Fl. 331002	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ered Agent. You must designate an individual or another	
The name and the Florida street address of the re	egistered agent are:	
Paul Davis Name	<u> </u>	
	ress (P.O. Box <u>NOT</u> acceptable)	
Tampa City, Sta	FL 33602 te, and Zip	
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete pe	accept service of process for the above stated limited his certificate, I hereby accept the appointment as it. I further agree to comply with the provisions of all rformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S	
	Ja Za	
Registered Agent's Signat	ure (REQUIRED)	
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ARTICLE IV- Manager(s) or Managing Member(s):

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

Name and Address:
Tampa Bay Sperts and Entertainment LLC 401 Channelside Drive Tampa FL 33602
ate of filing: (OPTIONAL) specific and cannot be more than five business days prior
or an authorized representative of a member.
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(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.)

DaviS
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)