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2011 OCT -7 EN J; 52 SEGRETARY OF STATE TALLAHASSEE: FLORIDA

COVER LETTER

TO: Régistration Division of	n Section Corporations				
SUBJECT: EVO	Music Group				
		ed Liability Com	pany		
The enclosed Articles	s of Organization and fee(s) are	submitted for fili	ng.		
Please return all corre	espondence concerning this matt	ter to the following	ng:		
<u>Jason</u>	Liebman				
		Name of Person	•		
Project	Audio Inc				
		Firm/Company			
11570	wiles rd #1				
		Address			701 7A
Coral Sp	rings, Florida 3306	57			8
	Cit	y/State and Zip Co	de		25 T
jtheengin	eer@gmail.com				- SE
	E-mail address: (to be used f		port notification)	•	of sag
For further information	on concerning this matter, please	e call:			
Lucian Sawye	er	at (954	, 801-047	. 7	Sum S
Nan	ne of Person		de & Daytime Te	lephone Number	
Enclosed is a check	for the following amount:				
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fil Certified C (additional co		\$160.00 Fili Certificate of Certified Co (additional cop	of Status &
·	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registra Division Clifton 2661 Ex	Courier Addressition Section nof Corporation Building Recutive Centerssee, FL 32301	ns · Circle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

AR'	TICL	ÆΙ	- Ns	me

The name of the Limited Liability Company is:

Evo Music Group 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:	Mailing Address:		
11570 Wiles Rd #2	11570 Wiles Rd #2		
coral springs FL 33067	coral springs FL 33067		
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of	Registered Agent. You must designate an indi		
Jason Liebman			[1]
	Vame	25	U
11570 Wiles	Rd #1	2	
Florida stre	et address (P.O. Box NOT acceptable)		
Coral Springs	_{FL} 33067		
Cit	tv. State, 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)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

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

MGR	Jason Liebman 11570 wiles rd #1 coral springs FL 33067
MGR	Lucian Sawyer 11570 wiles rd #1 coral springs FL 33067
•	ary) ther than the date of filing: (OPTIONAL) late must be specific and cannot be more than five business days prior
90 days after the date of fili	

(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.)

TASON Gehman
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)