

L11000117729

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

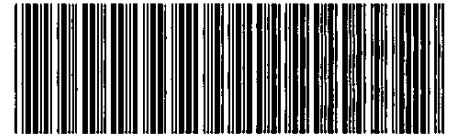
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Effective Date 10/

10/13/11--01008--016 \*

IN USE TO THE  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. B.

OCT 1

EXAM

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: No Pressure Entertainment LLC  
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:

Charlie A Davis  
Name of Person  
No Pressure Entertainment LLC  
Firm/Company  
12703 S.W. 53rd Court  
Address  
Miramar, FL 33027  
City/State and Zip Code  
MrNoPressure@gmail.com  
E-mail address: (to be used for future annual report notification)

SECRETARY  
TALLAHASSEE

For further information concerning this matter, please call:

Charlie A. Davis at ( 786 ) 344-0795  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 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  
P.O. Box 6327  
Tallahassee, FL 32314

**Street/Courier Address**  
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:

No Pressure Entertainment 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 are:

**Principal Office Address:**

Charlie A DAVIS  
Lori A DAVIS

**Mailing Address:**

12703 SW 53rd Court  
12703 SW 53rd Court

**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:

Effective Date

Lori A DAVIS

Name

12703 S.W. 53rd Court

Florida street address (P.O. Box **NOT** acceptable)

Miami FL 33027

City, State, and Zip

*Having been named as registered agent and to accept service of process for the above stated 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 the Florida 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 605.*

[Signature]  
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:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

CEO

President

**Name and Address:**

Charlie A Davis  
12703 SW 33rd Court

Claudale Davis  
3460 Foxcroft Rd Bldg 12  
Apt. 107 Miramar, FL 33025

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 10/18/2011 (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**

Charlie Davis

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

(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.)

Charlie A. 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)**