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(Requestor's Name)			
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PICK-UP WAIT MAIL			
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ECRETARY OF STATE
NIT AHASSEE, FLORIDA

# **COVER LETTER**

TO: Registration Sec Division of Corp			
SUBJECT: Six Stri	ng Marketing, L	LC	
SOBJECT.		ted Liability Company	
The enclosed Articles of O	organization and fee(s) are	submitted for filing.	
Please return all correspon	dence concerning this mat	ter to the following:	
James Day	vid Kozubal		
		Name of Person	
Six String I	Marketing, LLC		
		Firm/Company	
161 Charle	s St		
		Address	
Edgewater, F	FL 32132		
		ty/State and Zip Code	
jim@starlighth		for future annual report notification)	
For further information cor		•	
James D. Kozubal		at (954 ) 621-5262	
Name of I	Person	Area Code & Daytime Telep	phone Number
Enclosed is a check for t	he following amount:		
\$125.00 Filing Fee S	\$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 C	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

# Six String Marketing, 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:** 

161 Charles St, Edgewater, FL 32132

161 Charles St, Edgewater, FL 32132

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:

James David Kozubal

161 Charles St

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

Edgewater

FL 32132 City, 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..

(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:

"MGRM" = Managing Member  MGR  James David Kozubal  161 Charles St  Edgewater, FL 32132  (Use attachment if necessary)  CTICLE V: Effective date, if other than the date of filing: (OPTIONAL)	Title: "MGR" = Manager	Name and Address:
(Use attachment if necessary)  CTICLE V: Effective date, if other than the date of filing:		1ember
(Use attachment if necessary)  RTICLE V: Effective date, if other than the date of filing:	MGR	James David Kozubal
(Use attachment if necessary)  RTICLE V: Effective date, if other than the date of filing:	<del></del>	161 Charles St
RTICLE V: Effective date, if other than the date of filing:		Edgewater, FL 32132
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RTICLE V: Effective date, if other than the date of filing:  an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 days after the date of filing.)  REQUIRED SIGNATURE:  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 talse information submitted in a document to the Department of State		
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constitutes an affirmation under the penalties of perjury that the facts stated herein are true.  I am aware that any talse information submitted in a document to the Department of State	(In accordance v	vith section 608.408(3), Florida Statutes, the execution of this document
constitutes a third degree felony as provided for in s.817.155, F.S.)	constitutes an at	firmation under the penalties of perjury that the facts stated herein are true.
	1 am aware that constitutes a thi	any raise information submitted in a document to the Department of State

James David Kozubal

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)