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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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EXAMINER



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12 JAN 11 PH 12: 54

DEPARTMENT OF STATE OF STATE OF CORPORATIONS
TALLAHASSEE. FLORIDA

DIVISION OF COMPORATION

12 JAN 11 PH 2145

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Wide World Productions, LLC	
Wide World Froductions, Ede	
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
·	✓ Cert. Copy
	Photo Copy
	✓ Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
	Vehicle Search
	Driving Record
Requested by: SETH 01/11/12 11:00	UCC 1 or 3 File
Name Date Time	UCC 11 Search
Name Date inite	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

COVER LETTER

TO: Registration Section Division of Corporations	¢.
SUBJECT: Wide World Produc	tions, LLC
Name of Lin	nited Liability Company
The enclosed Articles of Organization and fee(s) a	re submitted for filing.
Please return all correspondence concerning this m	atter to the following:
Katharina Allison	
	Name of Person
	Firm/Company
3176 Prairie Ave.	
	Address
Miami Beach, Fl 33140	
_	City/State and Zip Code
threearts@mac.com E-mail address: (to be use	d for future annual report notification)
For further information concerning this matter, ple	ase call:
Katharina Allison	at (305) 534-2787
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 & Status & Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address	Street/Courier Address

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: Wide World Productions, LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address: The mailing address and str

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	<u>wiating Address:</u>
3,176 Prairie Ave	3176 Prairie Ave
Miami Beach, Fl 33140	Miami Beach, Fl 33140

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:

Katharina Allison	
N	ame
3176 Prairie	Ave.
Florida stree	et address (P.O. Box NOT acceptable)
Miami Beach	33140
Cit	y, 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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Katharina Allison 3176 Prairie Avenue Miami Beach Fi 33140
(Use attachment if necessary)	
	nust be specific and cannot be more than five business days prior
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 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.)

Katharina Allison

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)