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(Reque	estor's Name)	
(Addre	ss)	
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(City/S	tate/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Busin	ess Entity Nam	ne)
(Docur	nent Number)	
Certified Copies	Certificates	of Status
Special Instructions to Filin	ng Officer:	

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SECRETARY OF STATE STATE AMASSEE. FLORID.

T. CLINE
JAN 2 5 2012
EXAMINER

#1a5 016 5

COVER LETTER

TO: Registration of Division of	on Section f Corporations		
SUBJECT: Cap	oture a Song, LLC		
	Name of Limi	ted Liability Company	
The enclosed Article	es of Organization and fee(s) are	submitted for filing.	
Please return all cor	respondence concerning this mat	tter to the following:	
<u>Jonath</u>	an Carter		
		Name of Person	
Capture	e a Song, LLC		
		Firm/Company	
612 Ha	tchwood Dr		
		Address	
Haines C			
		ty/State and Zip Code	2012 SEC
jcart2783	@yahoo.com	for future annual report notification)	<u> </u>
For further informati	ion concerning this matter, pleas	•	2012 JAH 24 AI SECRITARY OF
Jonathan Cart	er	at (863) 353-6199	AM H: 17
Na	me of Person	Area Code & Daytime Telephone Number	10 A
Enclosed is a check	k for the following amount:		
S125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified C	of Status &
	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 1 - Name: The name of the Limited Liability Company i	s:			
Capture a Song, LLC				
(Must end with the words "Limited Lia	bility 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:			
612 Hatchwood Dr. Haines City, FL 33844	612 Hatchwood Dr Haines City, FL 33844			
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Registers) business entity with an active Florida registration.)	ed Office, & Registered Agent gistered Agent. You must designate an ind	t's Signature 20 lividual or mother 20 JAN		
The name and the Florida street address of the registered agent are:		24 F		
Jonathan Carter				
Name		OF STA		
612 Hatchwood Dr.		F STATE AT LOSIDA		
Florida street a	address (P.O. Box NOT acceptable)	₽ 		
Haines City	_{FL} 33844			
City,	State, and Zip			
Having been named as registered agent and t liability company at the place designated in				

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)

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	Name and Address:	
"MGRM" = Managing Member		
MGRM	Jonathan Carter	
	612 Hatchwood Dr.	
	Haines City, FL 33844	
MGRM	Jenifer Carter	
	612 Hatchwood Dr.	
	Haines City, FL 33844	
		
		<u></u>
/II		S 등 2
(Use attachment if necessary)		mi≪ ~ Co
LE V: Effective date, if other than th	e date of filing: January 16, 2012	MOTEGO).
	be specific and cannot be more than fi	
days after the date of filing.)	and a share a street of the street of times to	

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.)

Jonathan Carter

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)