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J. BRYAN

FEB 24.2012

EXAMINER

COVER LETTER

то:	Registration Se Division of Cor			
SUBJ	ECT: The J is S	Silent Productions, LL		
		Name of Limite	ed Liability Company	
The en	nclosed Articles of	Organization and fee(s) are s	submitted for filing.	
Please	e return all correspo	ndence concerning this matte	er to the following:	
	Chandler Nyjo	Brennen	Name of Person	
	The J is Silen	t Productions, LLC.		
			Firm/Company	1 2
	1321 NE 18th	Terrace		FILED PER 23 PA RECREASSEE.
			Address	23 11
	Cape Coral, Fl		/State and Zip Code	SSEE, FLORIE
	TheJisSilent@	gmail.com	or future annual report notification)	26 LOANG
For fu	rther information co	oncerning this matter, please		ν
Char	ndler Nyjo Bren		at (239) 297-9310	
	Name of	Person	Area Code & Daytime Telep	hone Number
Enclo	sed is a check for	the following amount:		
\$125.0	0 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 Ci	ircle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPAN THE REAL PROPERTY. **ARTICLE I - Name:** The name of the Limited Liability Company is: The J is Silent Productions, 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:** 1321 NE 18th Terrace 1321 NE 18th Terrace Cape Coral, FL 33909 Cape Coral, FL 33909 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: Chandler Nyjo Brennen Name 1321 NE 18th Terrace Florida street address (P.O. Box NOT acceptable) FL33909 City, State, and Zip Cape Coral 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)

Managing Member is as follows: Name and Address: Chandler Nyjo Brennen 321 NE 18th Terrace Cape Coral, FL 33909 of filing:
n authorized representative of a member.
), Florida Statutes, the execution of this document enalties of perjury that the facts stated herein are true. submitted in a document to the Department of State ovided for in s.817.155, F.S.)
en
printed name of signee
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