L12000028228

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(Oity) State/Zipir Holle #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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FILED

2012 FEB 27 M 1: 17

SECRETARY OF STATE

C. LEWIS
FEB 2 8 2012
EXAMINER

COVER LETTER

Registration Section Division of Corporations

TO:

SURJECT. Mach 1	Productions, LLC		
30BBC1.	Name of Limi	ted Liability Company	
The enclosed Articles of	of Organization and fee(s) are	submitted for filing.	
Please return all corresp	oondence concerning this ma	tter to the following:	
Darren How	ard		
		Name of Person	
Empyre Ent	ertainment Group, LL0	С	
		Firm/Company	
301 W Platt	: St #313		
***************************************		Address	
Tampa, FL 33	3606		
		ty/State and Zip Code	• • •
accounting@	empyreent.com	for future annual report notification)	
		·	
For further information	concerning this matter, pleas	se call:	
Darren Howard		at (813) 919-8237	
Name	of Person	Area Code & Daytime Tele	phone Number
Enclosed is a check for	or 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 C Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Mach 1 Productions, LLC	
(Must end with the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the property o	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1101 N Himes Ave Tampa, FL 33607	301 W Platt St #313 Tampa, FL 33606
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.)	tered Agent. You must designate an individual or another
The name and the Florida street address of the r	registered agent are: NITED 27 TALLAHASSEE
Darren Howard	registered agent are:
Name	SSE T
301 W Platt St #313	
Florida street add	dress (P.O. Box NOT acceptable)
Tampa, FL	FL 33606 高量 コ
City, St	ate, 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

Title:	Name and Address:	2012 FEB 27
"MGR" = Manager "MGRM" = Managing Member		SECRETARY D TALLAHASSEE.
MGRM	Empyre Entertainment (
	Tampa, FL 33606	
MGR	Darren Howard	
	301 W Platt St #313 Tampa, FL 33606	· · · · · · · · · · · · · · · · · · ·
(Has attachment if navarany)		
(Use attachment if necessary)		
LE V: Effective date, if other than the	e date of filing:	(OPTIONA
•	e date of filing: oe specific and cannot be more t	(OPTIONA han five business da
LE V: Effective date, if other than the fective date is listed, the date must be days after the date of filing.)	e date of filing: oe specific and cannot be more t	(OPTIONA han five business day
LE V: Effective date, if other than the fective date is listed, the date must be	e date of filing: De specific and cannot be more t	(OPTIONA han five business day
LE V: Effective date, if other than the fective date is listed, the date must be days after the date of filing.) REOUIRED SIGNATURE:	e date of filing: De specific and cannot be more to	han five business day
LE V: Effective date, if other than the fective date is listed, the date must be days after the date of filing.) REOUIRED SIGNATURE: Signature of a memory constitutes an affirmation yade I am aware that any false information.	pe specific and cannot be more t	han five business day fa member. n of this document stated herein are true.

ARTICLE IV- Manager(s) or Managing Member(s):

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)