# L12000040340

| (Re                     | equestor's Name)   | <u> </u>    |
|-------------------------|--------------------|-------------|
| (Ac                     | ldress)            |             |
| (Ad                     | Idress)            | <del></del> |
| (Cit                    | ty/State/Zip/Phon  | e #)        |
| PICK-UP                 | ☐ WAIT             | MAIL        |
| <b>(</b> Bu             | isiness Entity Nai | me)         |
| (Do                     | ocument Number)    |             |
| Certified Copies        | _ Certificate:     | s of Status |
| Special Instructions to | Filing Officer:    |             |
|                         |                    |             |
|                         |                    |             |
|                         |                    |             |
|                         |                    |             |

Office Use Only



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SECRETARY OF STATE, ALLAHASSEE, FI-DRIDA

J. SAULSBERRY EXAMINER MAR 22 2012

# **COVER LETTER**

| · · · · · · · · · · · · · · · · · · · |  |  |   |
|---------------------------------------|--|--|---|
| TO: Registration S Division of Co     |  |  |   |
| <sub>SUBJECT:</sub> Let Us            | s Talk Records, Ll                           | LC   |   |
| Souteci:                              | <del></del>                                  | d Liability Company                          |   |
| The enclosed Articles of              | f Organization and fee(s) are so             | ubmitted for filing.                         |   |
| Please return all corresp             | ondence concerning this matte                | er to the following:                         |   |
| Ryan Fro                              | om   |  |   |
|                                       | 1  | Name of Person                               |   |
| Let Us Ta                             | alk Records, LLC                             |  |   |
|                                       |  | Firm/Company                                 |   |
| 704 Swee                              | etwater Club Blvd                            |  |   |
| <u></u>                               |  | Address                                      |   |
|                                       |  |  |   |
| Longwood,                             |  |  |   |
| _                                     | •  | /State and Zip Code                          | 201   |
| ryanfroom@                            |  | or future annual report notification)        | 2 <del>2</del> |
|                                       | E-mail address: (to be used to               | or future annual report notification)        | 2012 MAR 2<br>SECHETAR<br>ALLAHASS  |
| For further information               | concerning this matter, please               | call:  | RY:   |
| Mary Acker                            |  | 240 \ 295-1612                               |   |
|                                       | of Person                                    | at (240 ) 295-1612 Area Code & Daytime Telep | hone Number 2   |
| rumo                                  | 011 013011                                   | rica code de Baytime Telep                   | none Number TE  |
| Enclosed is a check for               | or the following amount:                     |  |   |
|                                       |  |  | 161 CO OO EU: - E   |
| \$125.00 Filing Fee                   | \$130.00 Filing Fee & Certificate of Status. | \$155.00 Filing Fee &<br>Certified Copy      | \$160.00 Filing Fee,<br>Certificate of Status &   |
|                                       |  | (additional copy is enclosed)                | Certified Copy (additional copy is enclosed)  |
|                                       |  |  | (udamenai copy is energical)  |
|                                       | Mailing Address                              | Street/Courier Address                       |   |
|                                       | Registration Section                         | Registration Section                         |   |
|                                       | Division of Corporations P.O. Box 6327       | Division of Corporations<br>Clifton Building |   |
|                                       | Tallahassee, FL 32314                        | 2661 Executive Center Ci                     | rcle  |

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

| The name of the Limited Liability Company is:                             |
|---|
| Let Us Talk Records, LLC  |
| (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.") |
| ARTICI F II - Address:  |

# Principal Office Address:

### **Mailing Address:**

| 704 Sweetwater Club Blvd | 704 Sweetwater Club Blvd |
|--------------------------|--------------------------|
| Longwood, FL 32779       | Longwood, FL 32779       |

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 of another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Ryan Froom
Name

704 Sweetwater Club Blvd

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

Longwood FL 32779

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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

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The name and address of each Manager or Managing Member is as follows:

| "MGR" = Manager<br>"MGRM" = Managing Member  | Name and Address:   |
|--|---|
| MGRM   | Ryan Froom 704 Sweetwater Club Blvd Longwood, FL 32779                              |
|  | 2015<br>ALL   |
|  | MAR 2) A<br>CRE ARY OF<br>AHASSEE.  |
|  | AM 9;22  OF STATE  FLORICA  |
|  |   |
| (Use attachment if necessary)  ICLE V: Effective date, if other than the   | e date of filing: (OPTIONAL)  |
| ICLE V: Effective date, if other than the  | e date of filing: (OPTIONAL) be specific and cannot be more than five business days |
| ICLE V: Effective date, if other than the effective date is listed, the date must be 90 days after the date of filing.)  REQUIRED SIGNATURE:   |   |
| ICLE V: Effective date, if other than the effective date is listed, the date must be 90 days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a memb (In accordance with section 60 constitutes an affirmation under I am aware that any false information in the section for I am aware that any false information under I am aware that any false information in the section for I am aware that any false information under I am aware that I aware I awar | be specific and cannot be more than five business days  Troom                       |

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)