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EXAMINER



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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: The Cinema LLC
Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Lori Pope
Name of Person
Firm/Company
1000 SCOTIA DRIVE #404
Address HYPOLUXO FU 33462 City/State and Zip Code FNBALANCE NGMT @ AOLCOM E-mail address: (to be used for future annual report notification)
HYPOLUXO PL 33462
TALQUIANIA E MAM + Q ADI COM
F-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
10'0
Name of Persol at (501) 543-3737 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{\$\$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 Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Compa	ny is:	
The Cine	ma MOSIC, LLC	
(Must end with the words "Limited	d 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:	
1000 SCOTIA DRIVE. Hypoluko, R. 33442	#404 Same	
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	stered Office, & Registered Agent's Signature: n Registered Agent. You must designate an individual or another	
The name and the Florida street address of	f the registered agent are:	***
Lipduro	00. #404 eet address (P.O. Box NOT acceptable) FL 33462	予
c ال ﴿	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):

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

AGRM

Leighton Andman

13710 E. Morgan Onve

611644, A2 85295

MGR

MGR

MGRM

Andman

MGRM

MGRM

Loighton Andman

13710 E. Morgan Onve

611644, A2 85295

MGR

MGR

MGRM

ARTICLE V: Effective date, if other than the date of filing: ______. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

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)

The Cinema Music LLC

Additional MGR's:

MGR Rohan Kohli:

156 Hope St, Apt 6D

Brooklyn, NY 11211

MGR Tim Kirch

816 N. 6th Avenue

Phoenix, AZ 85003