## L12000090241

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W12000034033
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Office Use Only



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SECRETARY OF STATE
TALLAHASSEE.FLORIDA

ÀPPROVED AND FILED

D. BRUCE
JUL 1 1 2012
EXAMINER



## FLORIDA DEPARTMENT OF STATE Division of Corporations

June 25, 2012

CYNTHIA P. ALLEN P.O. BOX 531441 ST PETERSBURG, FL 33747

SUBJECT: CA PRODUCTIONS, LLC

Ref. Number: W12000034033

We have received your document for CA PRODUCTIONS, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed; and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The word "Limited" may be abbreviated as "Ltd." andthe word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company", "L.C.", and "LC".

The document number of the name conflict is L05000088244.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 612A00017360

www.sunbiz.org

## **COVER LETTER**

TO: Registration Section Division of Corporations	de la companya de la
SUBJECT: CA Production Name of Limited Liab	DNS, LLC bility Company
The enclosed Articles of Organization and fee(s) are submit	ted for filing.
Please return all correspondence concerning this matter to the	ne following:
Cynthia P. Allen (ME)	of Person
Fashion Mole	Company
P.O. Box 531441 St.	Petersburg, FL. 33747
	<b>A</b>
City/State:  TOSHION MOLE 11 @ C  E-mail address: (to be used for futuls	and Zip Code  AM AM Annual report notification)
For further information concerning this matter, please call:	FILED FILED ARY OF SSEE, FI
Cynthia Allen at (	170 375- <i>V3</i> 90 20 20 20 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
Certificate of Status Ce	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Section	Street/Courier Address Registration Section

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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:** 

	iability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
GUIFFORT, FL 33707	S. PO BOX 531441 81. Petersburg, FL. 33747	
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.)	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another	
The name and the Florida street address of the	ne registered agent are:	Þ
<u>Cynthia</u>	ARY OF REEL FILED	PPRO\
*** *** · · · · · · · · · · · · · · · ·	M Bray Blvd. S.  address (P.O. Box NOT acceptable)	\F[:
^	FL 33707 State, and Zip	
	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)

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Cynthia P. Allen
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	<u> </u>
	<del></del>
• ,	
(Use attachment if necessary)  LE V: Effective date, if other than fective date is listed, the date must days after the date of filing.)  REQUIRED SIGNATURE:	the date of filing: (OPTIONA st be specific and cannot be more than five business day
LE V: Effective date, if other than fective date is listed, the date must days after the date of filing.)  REQUIRED SIGNATURE:	st be specific and cannot be more than five business day
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LE V: Effective date, if other than fective date is listed, the date must days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a menute of a manufacture of a manuf	miler or an authorized representative of a member.  608.408(3), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State
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