

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Picase print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000219181 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: HUBCO Account Name

Account Number : 104662003400

Phone

: (516) 935-3940

Fax Number

: (516) 935-3080

Enler the email address for this business entity to be used for future annual report mailings. Enter only one email address ploase.

FLORIDA LIMITED LIABILITY CO.

Luminate Productions LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

K. SALY **EXAMINER**

SEP - 5 2012

H12000219181

ARTICLES O	FOR
FLORIDA LIMITEI	LIABILITY COMPANY
ARTICLE I - Name The name of the Limited Liability Company is: ILuminate	
ARTICLE II - Address The mailing address and street address of the principal office	of the Limited Liebility Company in
the maining address and successioness of the principal office	of the Elimited Elability Company is:
Principal Office Address:	Mailing Address:
2555 Collins Avenue #803	2555 Collins Avenue #803
Miami Beach, FL 33140	Miami Beach, FL 33140
ARTICLE III - Registered Agent, Registered Of The name and Florida street address of the registered agent a	
Harry M. Samuel	
	Name
2901 Stirling Road #307	
(P.O. Box or Mail Drop Rox NOT Acceptable)	
Fort Lauderdale, FL 33312	
at the place designated in this certificate, I hereby accept captuity. I further agree to comply with the provisions of	(City / State / Zip) rvice of process for the above stated limited liability company the appointment as registered agent and agree to act in this fall statutes relating to the proper and complete performance attions of mer position as registered agent as provided for in

Registered Agent's Signature / Harry M. Semuels

H12000219181

The name and address of each Mark	ager or Managing Member is as follows:
Title: "MGR"=Manager "MGRM"=Managing Member	Name and Address:
_MGR	Miral M. Koth - 2555 Collins Avenue #803, Miami Beach, Fl. 33140
(Use attachment if necessary) REQUIRED SIGNATURE:	
(In accordar	of a member or such fized representative of a member. nce with section 608.408(3), Florida Statutes, the execution of this institutes an affirmation under the penalties of perjury that the facts are true.)
	Miral M. Kotb
	Typed or printed name of signee