# 112-000/22-308

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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**EXAMINER** 

# **COVER LETTER**

SUBJECT: SFZ Music and Design 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:	
Tatiana Yagues	
Name of Person	
Firm/Company	
1716 Shoreside Circle	
Address	
Wellington, FL 33414	
City/State and Zip Code	
TYaques@yahoo.com	<b>第二年</b>
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:	SE SAVIE
Tatiana Yaques <sub>at (</sub> 305 ) 984-3862	Yen
Name of Person Area Code & Daytime Telephone No	umber
Enclosed is a check for the following amount:	
Certificate of Status Certified Copy Certificate of Status (additional copy is enclosed) Certificate of Status	.00 Filing Fee, ficate of Status & fied Copy onal 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

11/2

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

Principal Office Address:  1716 Shoreside Circle Wellington, FL 33414  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 or another business entity with an active Florida registration.)				pany is:	The name of the Limited Liability Co
ARTICLE II - Address:  The mailing address and street address of the principal office of the Limited Liability Company is  Principal Office Address:  Mailing Address:  1716 Shoreside Circle  Wellington, FL 33414  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 or another business entity with an active Florida registration.)					SFZ Music and Design LLC
The mailing address and street address of the principal office of the Limited Liability Company i  Principal Office Address:  Mailing Address:  1716 Shoreside Circle  Wellington, FL 33414  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 or another business entity with an active Florida registration.)		-		ted Liability Company, "L.L.C.," or "LLC.")	(Must end with the words "l
1716 Shoreside Circle Wellington, FL 33414  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 or another business entity with an active Florida registration.)	s:	Company	iability C	of the principal office of the Limited L	
Wellington, FL 33414  Wellington, FL 33414  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 or another business entity with an active Florida registration.)				Mailing Address:	Principal Office Address:
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)					
r car roo		other			(The Limited Liability Company cannot serve as
The name and the Florida street address of the registered agent are:	i di	SE -		of the registered agent are:	
Tatiana B. Yaques  Name	1 }			Name	Talialia B. Tayu
1716 Shoreside Circle	≠1:, 	= r	STA FLOR	<del></del>	
Florida street address (P.O. Box NOT acceptable)		0		`	
Wellington FL33414 City, State, and Zip					vveilington

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)

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

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

MGMR	James Yaques 1716 Shoreside Circle Wellington, FL 33414
MGMR	Leonard C. Insalaca 144 Griffin Way Canton, GA 30115
(Use attachment if necessary)	
LE V: Effective date, if other than the ffective date is listed, the date must be	date of filing: (OPTION) e specific and cannot be more than five business da
days after the date of filing.)  REQUIRED SIGNATURE:	Šů C

(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.)

James Yaques

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)