L/2000/25503

(Requestor's Name)
(Address)
(Address)
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A. LUNT

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EXAMINER

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ALLAHASSE STATE

COVER LETTER

TO:

Registration Section

-	Division of Co	rporations			
SUBJI	ест: Мес	atballs and Name of Limited	Clam Entert Liability Company	Tainment L.L.C.	,
The en	nclosed Articles o	f Organization and fee(s) are su	bmitted for filing.		
Please	return all corresp	ondence concerning this matter	to the following:		
	_	Blair	W. Dimitr	0	
			lame of Person		
	(Neatballs an	d Clam Ent		<u>`</u>
		I	irm/Company	\$255 \$25 \$3	
	39	07 Arelia	Drive Nor	十	
			Address	C 5	
	\mathcal{C}	elray Beac	h FL State and Zip Code	33445 5 5	
	,	City/s	State and Zip Code	0.0.0	
		Blair @ ST E-mail address: (to be used for	future annual report notification	1000,00m	
For fur		concerning this matter, please of		,	
		Dimitro of Person	at (6 - 1875 Gelephone Number	
Enclos	sed is a check fo	or the following amount:	·		
\$125.0 0	O Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$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 Addre Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 3230	ons er Circle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Meatballs and Clar	n Entertainment L.L.C.
(Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3907 Arelia Drive N. Delray Beach FL 33445	3907 Arelia Drive N. Delray Beach FL 33445
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the results	egistered agent are: Dimitro Cive North ress (P.O. Box NOT acceptable)
•	ccept service of process for the above stated limited
	is certificate, I hereby accept the appointment as

Registered Agent's Signature (REQUIRED)

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..

(CONTINUED)

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

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

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	Blair W. Dimitro 3907 Arelia Dr. N. Delray Beach PG 33445
	73/7 SECRETARY 28
	THE SE TO
(Use attachment if necessary)	

ARTICLE V: Effective date, if other than the date of filing: October 1, 2012(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.)

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)