L13000004000

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

13





500242076775

11/26/12--01010--001 **160.00

Effective Date

13 JAN -7 PM 4: 17

SIVE THE CORPORATIONS

72-55-20F

JAN -8 2013

(850) 245-6051.

COVER LETTER

TO:

Registration Section **Division of Corporations**

Whammit Productions 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:

Jason Bennick

Name of Person

Manager - Whammit Productions LLC

Firm/Company

611 S. Fort Harrison Ave #269

Address

Clearwater, FL 33756

City/State and Zip Code

Jason@whammit.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jason Bennick

at 443 454-5893

Name of Person

Enclosed is a check for the following amount:

□\$125.00 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 Address

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

13 JAN -7 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

November 27, 2012

JASON BENNICK 611 S FORT HARRISON AVE # 269 CLEARWATER, FL 33756

SUBJECT: WHAMMIT PRODUCTIONS LLC

Ref. Number: W12000059209

We have received your document for WHAMMIT PRODUCTIONS LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on November 27, 2012. Please amend your document accordingly.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of 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.

Tammy Hampton Regulatory Specialist II Registration/Qualification Section

Letter Number: 712A00028251

Effective Date

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	-
The name of the Limited Liability Company is	s:
Whammit Pro	dustions LLC
(Must end with the words "Limited Lial	
ARTICLE II - Address:	* * * * * * * * * * * * * * * * * * *
the mailing address and street address of the	principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
611 S. Ft. Harrison Ave #269	611 S. Ft. Harrison Ave #269
Clearwater, FL 33756	Clearwater, FL 33756
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regions business entity with an active Florida registration.)	
The name and the Florida street address of the	registered agent are:
Jason L. Bennick	
Nam	e .
331 Cleveland St. #313	
Florida street a	ddress (P.O. Box NOT acceptable)
Clearwater, FL 33755	FL
City, S	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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR	Jason L. Bennick	
	331 Cleveland St. #313	
	Clearwater, FL 33755	
MGRM	Matt Rodeghero	
	100 S. Jupiter Ave	
	Clearwater, FL 33755	
MGRM	Lisa Savage	
	331 Cleveland St. #313	
·	Clearwater, FL 33755	
•		
	•	
(Use attachment if necessary)		
ARTICLE V: Effective date, if other than the date of filing: January 1, 2013 . (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 secti constitutes an affirmation I am aware that any false	on 608.408(3), Florida Statutes, the execution of this document a under the penaltics of perjury that the facts stated herein arc true, information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.)	
Jason L. Bennick		
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)