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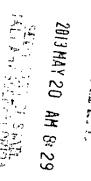
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Effective Date 5-15-13

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J. SAULSBERRY EXAMINER MAY 22 2013

## **COVER LETTER**

TO: Registration Section
Division of Corporations

URIFCT: Ericka Delismé Publishing & Media 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:

Ericka [	Delismé		
		Name of Person	
E. Delis	mé Publishin	g & Media Productio	ons, LLC
		Firm/Company	
3415 Ea	ast Jean Stre	et	
		Address	
Tampa,	Florida 3361	10	
		y/State and Zip Code	
edelisme@			*****
	E-mail address: (to be used t	for future annual report notification)	20
For further information	concerning this matter, please	call:	2013 MAY 20
Erioka Dali		012 504 7006	
Ericka Deli	Sine	_at(813 ) 504-7996	
Name o	of Person	Area Code & Daytime Telephone Nui	mber 📑
Enclosed is a check for	or the following amount:		% 2 8 2
□\$125.00 Filing Fee	■\$130.00 Filing Fee &	□\$155.00 Filing Fee & □ \$160.0	⇒ ∽ O Filing Fee,
a\$125.00 rining rec	Certificate of Status		icate of Status &
		(additional copy is enclosed) Certifi	ied Copy
		(additio	onal copy is enclosed)
	Mailing Address	Street/Courier Address	
	Registration Section	Registration Section	
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	
	Tallahassee, FL 32314	2661 Executive Center Circle	
	,	Tallahassee, FL 32301	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	lishing & Media Productions, LLC		
,	(Must end with the words "Limited L	ciability Company, "L.L.C.," or "LLC.")	
ARTICLE II -	Address:		
		e principal office of the Limited Liability Com	npany is:
Principal Office	e Address:	Mailing Address:	
E. Delismé Publishir	ng & Media Productions, LLC	E. Delismé Publishing & Media Productions, LLC	
3415 East Jean Stre	et	3415 East Jean Street	
Tampa, FL 33610		Tampa, FL 33610	
(The Limited Liability	Registered Agent, Registe y Company cannot serve as its own R an active Florida registration.)	ered Office, & Registered Agent's Signature egistered Agent. You must designate an individual or another	r
(The Limited Liability business entity with	y Company cannot serve as its own R	egistered Agent. You must designate an individual or another	Z013 HA)
(The Limited Liability business entity with	y Company cannot serve as its own R an active Florida registration.) ne Florida street address of t Ericka Delismé	egistered Agent. You must designate an individual or another the registered agent are:	2013 HAY 20
(The Limited Liability business entity with	y Company cannot serve as its own R an active Florida registration.) ne Florida street address of t Ericka Delismé	egistered Agent. You must designate an individual or another the registered agent are:	Z013 HA)
(The Limited Liability business entity with	y Company cannot serve as its own R an active Florida registration.)  The Florida street address of the Ericka Delismé  No. 3415 East Jean Street	he registered agent are:	2013 MAY 20 AM
(The Limited Liability business entity with	y Company cannot serve as its own R an active Florida registration.)  The Florida street address of the Ericka Delismé  No. 3415 East Jean Street	he registered agent are:	2013 MAY 20 AM 8: 2
(The Limited Liability business entity with	y Company cannot serve as its own R an active Florida registration.)  ne Florida street address of t  Ericka Delismé  No  3415 East Jean Street  Florida stree  Tampa,	he registered agent are:  t address (P.O. Box NOT acceptable)	2013 MAY 20 AM 8: 2

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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:

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGR	Ericka Delismé
	3415 East Jean Street
	Tampa, FL 33610
	· · · · · · · · · · · · · · · · · · ·
	e date of filing: May 15, 2013 . (OPTIONAL) at be specific and cannot be more than five business of
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CLE V: Effective date, if other than the effective date is listed, the date musto or 90 days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member of a membe	er or an authorized representative of a member.  8.408(3), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true.  mation submitted in a document to the Department of State.
CLE V: Effective date, if other than the effective date is listed, the date must to or 90 days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member of a may after that any false information under the constitutes a third degree felony of the constitutes a third degree felony of the constitutes and the constitutes a third degree felony of the constitutes and the constitutes a third degree felony of the constitutes and the constitutes a third degree felony of the constitutes a t	er or an authorized representative of a member.  8.408(3), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true.  mation submitted in a document to the Department of State.
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