# <u>U3000121033</u>

(Requestor's Name)
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AUG 2 7 2013 J. BRYAN (850) 245-6051.

#### **COVER LETTER**

TO:

Registration Section
Division of Corporations

cr. McCullough Music Press, 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:

# Donald McCullough

Name of Person

# McCullough Music Press, LLC

Firm/Company

421 Oceanwalk Dr S

Address

# Atlantic Beach, FL 32233-4574

City/State and Zip Code

mccullough.don@comcast.net

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

For further information concerning this matter, please call:

# Donald McCullough

\_904

853-6236

Name of Person

Area Code & Daytime Telephone Number

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

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	s:  billity Company, "L.L.C.," or "LLC.")  principal office of the Limited Liability Company is
The name of the Limited Liability Company i	s:
McCullough Music Press, LLC	
(Must end with the words "Limited Lia	ability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	٠٠٠
	principal office of the Limited Liability Company is
Ç	
Principal Office Address:	Mailing Address:
421 Oceanwalk Dr S	421 Oceanwalk Dr S
Atlantic Beach, FL 32233-4574	Atlantic Beach, FL 32233-4574
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.)  The name and the Florida street address of the	gistered Agent. You must designate an individual or another
Donald McCullough	
Nam	ne
421 Oceanwalk Dr S	
Florida street a	address (P.O. Box NOT acceptable)
Atlantic Beach, FL 3223	33-4574
City,	State, and Zip
liability company at the place designated in	o accept service of process for the above stated limited n this certificate, I hereby accept the appointment as acity. 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)

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:  "MGR" = Manager  "MGRM" = Managing Member  MGR  Donald McCullough  421 Oceanwalk Dr S  Atlantic Beach, FL 32233-4574  (Use attachment if necessary)  TICLE V: Effective date, if other than the date of filing: (Use filing date) (OPTIONA an effective date is listed, the date must be specific and cannot be more than five business or to or 90 days after the date of filing.)		ging Member		_
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REQUIRED SIGNATURE:	ective date is list or 90 days after th	ted, the date mus he date of filing.)		-
Annex M. C.M.	-	Jonal	d Mc Cullar	<u>.                                    </u>
yound occur		signature of a member	er or an authorized representative of a member.	
Signature of a member or an authorized representative of a member.		es an affirmation under	or the penalties of perjury that the facts stated herein are true.	
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.)	I am awa			
(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	I am awa	es a third degree felon		

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)