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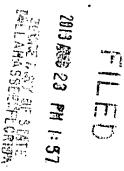
(Requestor's Name)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special last with the A. Cilian Office					
Special Instructions to Filing Officer:					
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A. LUNT					
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COVER LETTER

4
TO: Registration Section Division of Corporations
SUBJECT: bNice 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:
David Pretlow Name of Person
Name of Person
Firm/Company
731 KELLY ST.
the second secon
DESTIN, FL 32541 City/State and Zip Code dave @ fretlow.com E-mail address: (to be used for future annual report notification)
City/State and Zip Code
E-mail address: (to be used for future annual report potification)
For further information concerning this matter, please call:
Name of Person at (850) 420-1872 Area Code & Daytime Telephone Number
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
Z\$125.00 Filing Fee Certificate of Status □\$130.00 Filing Fee Certified Copy (additional copy is enclosed) □\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Street/Courier Address Registration Section Division of Corporations Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability	y Company is:
bNice Prod	luctions, LLC
(Must end with the wor	rds "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street ad	dress of the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
731 Kollyst. Destin, FL	731 Kelly St Destm, FL 3254/
	nt, Registered Office, & Registered Agent's Signature: re as its own Registered Agent. You must designate an individual or another tration.)
The name and the Florida street a	ddress of the registered agent are:
Dav	id Pretlow
	Name 🗎 🔀
731	KELIY ST.
	Florida street address (P.O. Box NOT acceptable)
DES	TIN FL 3254/ Size and Zin
	City, State, and Zip
liability company at the place of registered agent and agree to act all statutes relating to the prope	l agent and to accept service of process for the above stated limited designated in this certificate, I hereby accept the appointment as at in this capacity. I further agree to comply with the provisions of er 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
	El Yu
Kegistere	ed 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:

	Name and Address:	p.	<u>Γitle:</u> 'MGR" = Manage
			'MGRM" = Manage
retlow elly st n, FL 325	David 731 Dest	-	MGR
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a member.	authorized representativ	ignature of a membe	
stated herein are true.), Florida Statutes, the executable of perjury that the fact submitted in a document to the ovided for in s.817.155, F.S.	es an affirmation under re that any false inform	constitu I am aw
_	PRETLOW printed name of signee		Constitu

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)