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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Rocket Out 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:
PAUL D. RINGENDERGER
Rocket Out Productions, LLC
2393 TALLAVANA TRAIL
HAVANA, FL 32333 City/State and Zip Code rocketout productions @gmail. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Paul D. Ringenbetger 850, 868-0383 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301

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SEGRETARY OF STATE
TAIL MINKSSEE IN SAME
TAIL MINKSSEE IN SAME

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
Rocket Out Productions, LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
2393 TALLAUANA TRAIL 2393 TALLAUANA TRAIL HAVANA FL 32333 HAVANA FL 32333
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are: PAUL D. RINGEN BERGER Name 2393 Tallavana TRAIL Florida street address (P.O. Box NOT acceptable) HAVANA FL 32333 City 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 605, F.S Registered Agent's Signature (REQUIRED)
(CONTINUED)
Page 1 of 2

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SECRETARY OF STATE

<u>Fitle:</u> 'AMBR" = Authorized Member	Name and Address:
'MGR" = Manager	0 1 N Din = 1 = 0
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	HAUANA FI 32333
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AMBR	ERA SINGER
	HAVANA FL 32 333
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ARTICLE IV-

Page 2 of 2

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

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SECRETARY OF STATE