114000074848

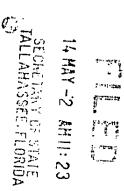
(Requestor's Name)	
(Address)	
(Address)	
· · ·	
(City/State/Zip/Phon	<u> </u>
(City/State/Zip/Phon	e #)
PICK-UP WAIT	MAIL
(Business Entity Na	me)
(Document Number)	
Certified Copies Certificates	s of Status
	 1
Special Instructions to Filing Officer:	
•	
ļ	
	[

Office Use Only



500259239345

05/02/14--01035--004 **160.00



ST SEPTEMBER MAY 08 2014

4/30/14 TO WHOM IT MAY CONCERN! THE FORMING OF: FRAZETTA ENTERTAINMENT GROP LLC 186 TIM TAM -CT. LAKE MARY FL 32746 407.456,2313 regradio @ mac. com.

falcon's treehouse

COVER LETTER

Division of	f Corporations
SUBJECT:	Name of Limited Liability Company
	Name of Bunted Buoliny Company
The enclosed Article	es of Organization and fee(s) are submitted for filing.
Please return all con	respondence concerning this matter to the following:
Ro	Name of Person
	Name of Person
F	PIRM/Company
	Firm/Company
_\8	6 TIM TAM CT Address
	Address
LA	KE MARY, FLORIDA, 32746 City/State and Zip Code adio Omac. com E-mail address: (to be used for future annual report notification)
v av	adia amazip code
	E-mail address: (to be used for future annual report notification)
	ion concerning this matter, please call:
RC. ARA	ame of Person at (407) 456-2313 Area Code Daytime Telephone Number
N	ame 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 Certificate of Status Certified Copy (additional copy is enclosed) S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

TO:

Registration Section

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: The name of the Limited Liability Company is:
FRAZETTA ENTERTAINMENT GROUP - 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:
186 TIM TAM CT LAKE MARY FL, 32746 LAKE MARY, FL, 32746
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:
186 TIM TAM OT
186 TIM TAM CT
Florida street address (P.O. Box NOT acceptable)
City FL 32746 Zip
Having been named as registered agent and to accept service of process for the above stated limited liability company 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 615, F.S Registered Agent's Signature (REQUIRED) (CONTINUED) Page 1 of 2

<u>Fitle:</u> 'AMBR" = Authorized Member 'MGR" = Manager	Name and Address:
"MGR"	
RANK FRAZETTA JR.	141 MUSEUM LANE
PRESIDENT"	EAST STROUDS BURG-, PA,
"AMBR"	
aminic ARADIO JR.	100 2nd Ave, APT 22A
MAGING MOMBEL "	NY , NY , 100 ID
· AMBR "	
deept charles aradio	186 TIM TAM CT
	1 to a character of the control of the
anading moment "	LAKE MARZY, FLOPIDA, 52746
ANGGING MEMBER "	CARE WARMY, PLOVEDON, SE 194
(Use attachment if necessary) EV: Effective date, if other than the date	e of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or 90
	e of filing: (OPTIONAL)
(Use attachment if necessary) EV: Effective date, if other than the date ective date is listed, the date must be sp	e of filing: (OPTIONAL)
(Use attachment if necessary) EV: Effective date, if other than the date ctive date is listed, the date must be sport filling.)	e of filing: (OPTIONAL)
(Use attachment if necessary) E V: Effective date, if other than the date ective date is listed, the date must be sportfilling.) E VI: Other provisions, if any.	e of filing: (OPTIONAL)
(Use attachment if necessary) EV: Effective date, if other than the date ctive date is listed, the date must be sport filling.)	e of filing: (OPTIONAL)
(Use attachment if necessary) E V: Effective date, if other than the date ective date is listed, the date must be sportfilling.) E VI: Other provisions, if any. REQUIRED SIGNATURE:	e of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or 90
(Use attachment if necessary) E V: Effective date, if other than the date ective date is listed, the date must be sport filling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a m (In accordance with section 6)	e of filing:
(Use attachment if necessary) E V: Effective date, if other than the date ective date is listed, the date must be sport filling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a more	e of filing:
(Use attachment if necessary) E V: Effective date, if other than the date ective date is listed, the date must be sport filing.) E VI: Other provisions, if any. Signature of a modern of the economic of t	e of filing:
(Use attachment if necessary) E V: Effective date, if other than the date ective date is listed, the date must be sport filling.) E VI: Other provisions, if any. Signature of a modern of the economic of	ember or an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document ler the penalties of perjury that the facts stated herein are true. rmation submitted in a document to the Department of State my as provided for in s.817.155, F.S.)
(Use attachment if necessary) E V: Effective date, if other than the date ective date is listed, the date must be sport filling.) E VI: Other provisions, if any. Signature of a modern of the economic of	ember or an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document ler the penalties of perjury that the facts stated herein are true. ormation submitted in a document to the Department of State only as provided for in s.817.155, F.S.) Typed or printed name of signee
(Use attachment if necessary) E V: Effective date, if other than the date ective date is listed, the date must be sport filling.) E VI: Other provisions, if any. Signature of a modern of the economic of	ember or an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document ler the penalties of perjury that the facts stated herein are true. Immation submitted in a document to the Department of State may as provided for in s.817.155, F.S.) Typed or printed name of signee
CUse attachment if necessary) E V: Effective date, if other than the date ctive date is listed, the date must be sp filing.) E VI: Other provisions, if any. Signature of a m (In accordance with section 6 constitutes an affirmation und I am aware that any false info constitutes a third degree felo	ember or an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document ler the penalties of perjury that the facts stated herein are true. ormation submitted in a document to the Department of State only as provided for in s.817.155, F.S.) Typed or printed name of signee