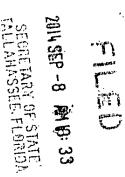
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(Re	equestor's Name)	
(Ac	Idress)	<u> </u>
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
• -	Office Use Onl	v



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COVER LETTER

	ation Section n of Corporations		
SUBJECT: Re	d Letter Filmz		·
	Name of Li	mited Liability Company	
The enclosed Art	ticles of Organization and fee(s) a	re submitted for filing.	
Please return all	correspondence concerning this n	natter to the following:	
Alvir	n A Ruiz		
	·	Name of Person	
Red	Letter Filmz		- Fo 28
		Firm/Company	ECR A
3126	3 W Lloyd St		ETAI HAS
		Address	-3355 -8
	. El coror		-17 The
<u>Pens</u>	sacola, FL 32505	City/State and Zip Code	5 TATE 33
malakai136	i0@yahoo.com		1, 27,
	E-mail address: (to be use	d for future annual report notifica	ation)
For further inform	nation concerning this matter, ple	ase call:	
Alvin A Ruiz	. at (a	571-1149	
	Name of Person		lephone Number
Enclosed is a che	ck for the following amount:		
☑ \$125.00 Filing F		□\$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 Adding Registration Section Division of Corporate Clifton Building 2661 Executive Centrallahassee, FL 3236	tions ter Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:		
Red Letter Filmz LLC (Must end with the words "Limited	Liability Company, "L.L.C.," or "L	LC.")
ARTICLE II - Address: The mailing address and street address of the principal of	office of the Limited Liability Compa	any is:
Principal Office Address:	Mailing Address:	
Alvin A Ruiz 3126 W Lloyd St Pensacola, FL 32505		
ARTICLE III - Registered Agent, Registered Office, (The Limited Liability Company cannot serve as its own another business entity with an active Florida registration	Registered Agent. You must design	ate an individual or
The name and the Florida street address of the registered	l agent are:	AREA TO
Alvin Ruiz		
Name		
3126 W Lloyd St Florida street address (P.O. Bo	v NOT acceptable)	7
·		57.74F
Pensacola City	FL 32505 Zip	On W
Having been named as registered agent and to accept se the place designated in this certificate, I hereby accep capacity. I further agree to comply with the provisions of my duties, and I am familiar with and accept the ob	ervice of process for the above stated of the appointment as registered agen of all statutes relating to the proper of all statutes relating to the proper of the proper of the following of my position as registered for 605, F.S.	nt and agree to act in this and complete performance
(CONTINU	JED)	

Page 1 of 2

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	rized repres	or da Statutes, the execution that the facts si	or da Statutes, the execution of the perjury that the facts stated herei	rized representative of a member. Inda Statutes, the execution of this docu- perjusy that the facts stated herein are true in a document to the Department of State

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