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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : SUPERBIZ.COM, INC.
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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**FLORIDA LIMITED LIABILITY CO.
ALL STAR SHOWS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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15 JUL 13 PM 4:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 JUL 13 AM 10:30

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**ARTICLES OF ORGANIZATION FOR A
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I NAME

The name of the Limited Liability Company is:

ALL STAR SHOWS LLC

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

13194 US HIGHWAY 301 S, STE 163

RIVERVIEW, FLORIDA 33578

ARTICLE III PURPOSE

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV REGISTERED AGENT

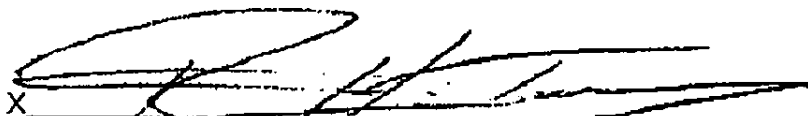
The name and the Florida street address of the registered agent are:

RICHARD H TOWSLEY

11617 STORYWOOD DRIVE

RIVERVIEW, FLORIDA 33578

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.



X RICHARD H TOWSLEY / Registered Agent's signature

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PAGE 2 ALL STAR SHOWS LLC

ARTICLE V

The name and address of each person authorized to manage and control the Limited Liability Company:

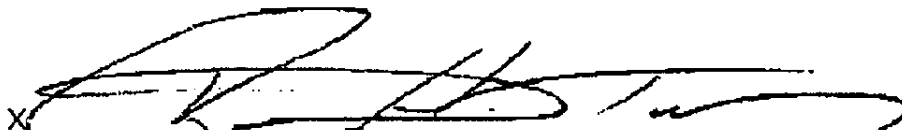
AUTHORIZED MEMBER

RICHARD H TOWSLEY

13194 US HIGHWAY 301 S, STE 163

RIVERVIEW, FLORIDA 33578

.....

A handwritten signature in black ink, appearing to read 'R. H. Towsley', is written over a horizontal line.

RICHARD H TOWSLEY / Authorized Representative's signature

(In accordance with section 605.0203 (1) (b), 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.)

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TALLAHASSEE, FLORIDA

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