

**1160001824H07**  
FAX No. \_\_\_\_\_  
Division of Registration  
Alaska Department of State

Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

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To:

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

### From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.  
Account Number : I20000000146  
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Fax Number : (305)444-4977

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

SECRETARY OF STATE  
ATLANTA, GEORGIA  
F. FLORIDA

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FLORIDA LIMITED LIABILITY CO.

CALDERON MUSIC LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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## Corporate Filing Menu

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FAX No.:

P. 002

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

CALDERON MUSIC 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:

1000 PONCE DE LEON BLVD  
STE 105  
CORAL GABLES, FL 33134

Mailing Address:

1000 PONCE DE LEON BLVD  
STE: 105  
CORAL GABLES, FL 33134

**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:

EXPRESS CORPORATE FILING SERVICE INC.

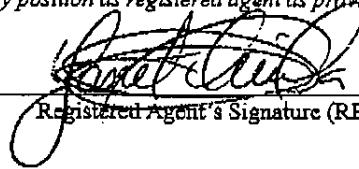
Name

1000 PONCE DE LEON BLVD SUITE: 105

Florida street address (P.O. Box NOT acceptable)

CORAL GABLES      FL      33134  
City                    State                    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)

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TALLAHASSEE, FLORIDA  
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**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

**Name and Address:**

JORGE IVAN CALDERON ZAPATA

1000 PONCE DE LEON BLVD STE: 105

CORAL GABLES, FL 33134

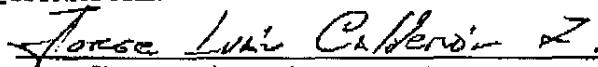
(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: JANUARY 01, 2016 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.  
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.

JORGE IVAN CALDERON ZAPATA

Typed or printed name of signee

**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)