

L16000062857

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

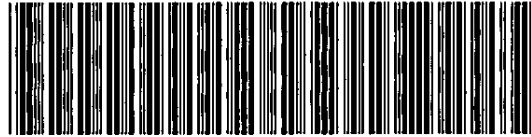
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

~~W16-15126~~

Office Use Only



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02/22/16--01027--006 **160.00

FILED

16 MAR 30 PM 6:09

SECRETARY OF STATE
TALLAHASSEE FLORIDA

VH

COVER LETTER

TO: Registration Section
Division of Corporations

(DJAA RECORDS LLC.)

SUBJECT: DELIVERING JUSTIFIED ASPIRING ARTISTS RECORDS 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:

ANTHONY GOMEZ

Name of Person

DJAA RECORDS

Firm/Company

4229 WARWICK HILLS DRIVE

Address

WESLEY CHAPEL, FL 33543

City/State and Zip Code

DJAARECORDS@ICLOUD.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANTHONY GOMEZ

at (813) 607-0826

Name 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

☐

\$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

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 1, 2016

ANTHONY GOMEZ
4229 WARWICK HILLS DRIVE
WESLEY CHAPEL, FL 33543

SUBJECT: DELIVERING JUSTIFIED ASPIRING ARTISTS RECORDS LL./
DJAA RECORDS LLC.
Ref. Number: W16000015126

We have received your document for DELIVERING JUSTIFIED ASPIRING ARTISTS RECORDS LL./ DJAA RECORDS LLC. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list only one entity name and remove the other.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 316A00004262

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

DJAA RECORDS LLC.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

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TALLAHASSEE FLORIDA

ARTICLE II - Address:

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

Principal Office Address:

4229 WARWICK HILLS DRIVE
WESLEY CHAPEL FL 33543

Mailing Address:

4229 WARWICK HILLS DRIVE
WESLEY CHAPEL FL 33543

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:

ANTHONY GOMEZ

Name

10451 MEADOW SPRING DRIVE

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

TAMPA

FL

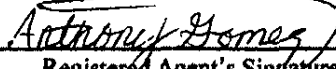
33647

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)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR=

Name and Address:

DADIVA VELEZ

4229 WARWICK HILLS DRIVE

WESLEY CHAPEL FL 33543

AMBR=

ANTHONY GOMEZ

4229 WARWICK HILLS DRIVE

WESLEY CHAPEL FL 33543

(Use attachment if necessary)

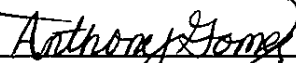
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.

ANTHONY GOMEZ

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)