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(Re	equestor's Name)			
(Ad	dress)	· · · · · · · · · · · · · · · · · · ·		
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PICK-UP	WAIT	MAIL		
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Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer				

Office Use Only



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DEPARTMENT OF STAP

FILED
WIN MAR 23 AH 9: 41
PLOKETARY OF STATE

## COVER LETTER

	New Filing Section Division of Corporations		-
SUBJEC	T: G Monee' Music Name of Lim	& Media Group, LLC ited Liability Company	
The encie	sed Articles of Organization and fee(s) are	submitted for filing.	
' Please ret	ûrn all correspondence concerning this mat	ter to the following:	No. 1 Mes server . W
		Name of Person	
	3437 Blue Ja	y Drive	<del></del>
	JAllahossee Q munec P g	FLorida 32305  ity/State and Zip Code	<u>paol·com</u>
For further	r information concerning this matter, please	e call:	
, ,	Name of Person A	PSU 214-376P rea Code Daytime Telephone Number	— १३० , १४८८ इस्ट्रब ० :
Enclosed	is a check for the following amount:		
\$125.00	Filing Fee \$130.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certifical	ite of Status &
	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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must contain 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:

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:

7437 Blue Jay Drive Florida street address (P.O. Box NOT acceptable)

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.

egistered Agent's Signature (REQUIRED)

(CONTINUED)

ner idea o as

, <u> </u>	Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	5.00	men aga . W
	MGR	Jacqueline I vim Perhins 3437 blue Jay Drive Tano 4055 cc, FL 32305		
	AMBR	Tash T. Martin 3437 Klue Joy Drive Tollchosee, FL 32305		
	AMBR	Jancal Rondwich  1307 Success Way  Jallahrssey Fi 323UT		
(If an e the date <u>Note:</u>	ffective date is listed, the date must be specific e of filing.)	ing: March 16, 2018, (OPTIONAL)  and cannot be more than five business days prior to or 90 da  the applicable statutory filing requirements, this date will not be ate's records.		Mens outlies (*) al
ARTIC	CLE VI: Other provisions, if any.		<del></del>	
	This document is executed in	er or an authorized representative of a member. In accordance with section 605.0203 (1) (b), Florida Statutes. In accordance with section a document to the Department of State		

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

constitutes a third degree felony as provided for in s.817.155, F.S.

Jacque L'ne Perkins
Typed or printed name of signee

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)

FILEU 30 AM 9: 4.