

Florida Department of State
Division of Corporations
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FLORIDA DEPARTMENT OF STATE
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INFORMATION SERVICES

**FLORIDA LIMITED LIABILITY CO.
t2Media & Entertainment, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2018 MAR 29 AM 9:30

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Electronic Filing Menu

Corporate Filing Menu

Help

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

t2Media & Entertainment, LLC

(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:David J. Schottenfeld, P.A.7520 NW 5 St., #203Plantation, FL 33317Mailing Address:David J. Schottenfeld, P.A.7520 NW 5 St., #203Plantation, FL 33317

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:

David J. Schottenfeld, Esq.

Name

7520 NW 5 Street, Suite 203Florida street address (P.O. Box **NOT** acceptable)PlantationFL33317

City

State

Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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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H18000100698

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:

Stephen Padveen

5615 Melling Ave.

Montreal, Quebec, Canada H4W 2C1

AMBR

Susan Rakita

5615 Melling Ave.

Montreal, Quebec, Canada H4W 2C1

AMBR

Ken McCormack

439 Chemin Mont Catherine

St. Agathe, Quebec, Canada J8C 3T8

AMBR

Corey Padveen


3777 Cote des Neiges, #418

Montreal, Quebec, Canada H3H 1V8

(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.

David J. Schottenfeld

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)

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