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Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Einstein Music Gr Name of Limited Liabil	ity Company
The enclosed Articles of Organization and fee(s) are submitted	for filing.
Please return all correspondence concerning this matter to the f	following:
Oscar E. Diaz	
Name of	Person
	·
Firm/Co	mpany
10475 SW 153rd ct	#8
Addr	ess
Miami, FL 33196 Dendiaz @gmail.com	주는 1
City/State an	d Zip Code
E-mail address: (to be used for future a	d Zip Code
For further information concerning this matter, please call:	
~	
Oscar E. Diaz at 786	<u>, 389-0183 📗 🗧 🛭 🔀 </u>
Name of Person Area Code	Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee S130.00 Filing Fee & S155.0	00 Filing Fee & S160.00 Filing Fee, Certificate of Status & Certified Copy
	(additional copy is enclosed)
	Street Address
	New Filing Section
	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

Einstein Music Group 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:	Mailing Address:
10475 SW 153rd ct. #8 Miami, FL 33196	Attn: Oscar Diaz 10475 SW 153rdct #8 Miami, FL 33196
	r

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:

Oscar E	Diaz	•
	Name	
10475 SV	V 153rd	1 ct. #8
Florida street address (
Miami	FL	33196
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

ignature (REQUIRED)

(CONTINUED)

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	Oscar E. Diaz 10475 SW 153rdc+ #8
AMBR	Brandon I saac Phillips
1 N O D	1910 Tanya Lee Circle # 102 Davie FL 33328
AMBR_	Jonathan Ruben Melendez 9741 NW 11th Street Plantation, FL 33322
	
(Use attachment if necessary)	
EV: Effective date, if other than the date of filing:	(OPTIONAL)

REOURED SIGNATURE:

ARTICLE VI: Other provisions, if any.

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.

USCAY E. DIAZ
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)