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FERRITORS MERCIAL TO SERVICES

May 4, 2018

MATTHEW DEL GIUDICE 2441 SOUTHERN HILL CT. OVIEDO, FL 32765

SUBJECT: SAIKYO STUDIOS LLC Ref. Number: W18000041831

We have received your document for SAIKYO STUDIOS 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):

The registered agent must sign accepting the designation.

Please return 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.

DANIEL L O'KEEFE Regulatory Specialist II

Letter Number: 018A00009219



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

- 4	N.	6 1	I -	 me:

The name of the Limited Liability Company is:

Saikyo Studios 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:

2441 Southern Hills Ct.	2441 Southern Hills Ct.		
Oviedo F1, 32765	Oviedo, FL 32765		

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:

Northwest Registered Agent. LLC.

Nami

3030 N. Rocky Point Dr. STE 150A

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

TampaFL33607CityStateZip

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..

Northwest Registered Agent, LLC.

Tom Giover - Assistant Secretary

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

The name and address of each person author	Name and Address:
Title: "AMBR" = Authorized Member "MGR" = Manager	Matthew Del Giudice 2441 Southern Hills Ct.
ANON	Oviedo, FL 32765
(Use attachment if necessary)	(OPTIONAL)
TICLE V: Effective date, if other than the date an effective date is listed, the date must be spendate of filing.) ote: If the date inserted in this block does not reduce document's effective date on the Department.	of filing:
CTICLE VI: Other provisions, if any.	
	- 121
	member or an authorized representative of a member. cuted in accordance with section 605.0203 (1) (b). Florida Statutes, cuted in accordance with section 605.0203 (1) (b). Florida Statutes, cuted in accordance with section 605.0203 (1) (b). Florida Statutes, cuted in accordance with section 605.0203 (1) (b). Florida Statutes, cuted in accordance with section 605.0203 (1) (b). Florida Statutes, cuted in accordance with section 605.0203 (1) (b). Florida Statutes, cuted in accordance with section 605.0203 (1) (b). Florida Statutes, cuted in accordance with section 605.0203 (1) (b). Florida Statutes, cuted in accordance with section 605.0203 (1) (b). Florida Statutes, cuted in accordance with section 605.0203 (1) (b). Florida Statutes, cuted in accordance with section 605.0203 (1) (b). Florida Statutes, cuted in accordance with section 605.0203 (1) (b). Florida Statutes, cuted in accordance with section 605.0203 (1) (b). Florida Statutes, cuted in accordance with section 605.0203 (1) (b). Florida Statutes, cuted in accordance with section 605.0203 (1) (b). Florida Statutes, cuted in accordance with section 605.0203 (1) (b). Florida Statutes, cuted in accordance with section 605.0203 (1) (b). Florida Statutes, cuted in accordance with section 605.0203 (1) (b). Florida Statutes, cuted in accordance with section 605.0203 (1) (b). Florida Statutes, cuted in accordance with section 605.0203 (1) (b). Florida Statutes, cuted in accordance with section 605.0203 (1) (b). Florida Statutes, cuted in accordance with section 605.0203 (1) (b). Florida Statutes, cuted in accordance with section 605.0203 (1) (b). Florida Statutes, cuted in accordance with section 605.0203 (1) (b). Florida Statutes, cuted in accordance with section 605.0203 (1) (b). Florida Statutes, cuted in accordance with section 605.0203 (1) (b). Florida Statutes, cuted in accordance with section 605.0203 (1) (b). Florida Statutes, cuted in accordance with section 605.0203 (1) (b). Florida Statutes, cuted in accordance with section 605.0203 (1) (b). Florida Sta

Typed or printed name of signce

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

Matthew Del Giudice

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

