- L18000133983

(Re	questor's Name)	
(Ad	dress)	
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	y/State/Zip/Phone	-
(Cit	y/State/Zip/P110fit	: #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	



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SEUNCHARY OF STATE
TALLAHASSEE, FI ORIDA

Office Use Only

W18-45405
MAY 3 1 2018

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Frank Filer tainment Line C. 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:
Autwor Fulton Name of Person
Fuduh # Entertainment L.L.C. Firm/Company
3511 NW 36AVE
Lauderdale Lakes Florida 33309 City/State and Zip Code Lauless 9 (do Ord gna'). Con E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Antwork Fulf of at (954) 882-3013 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: \$125.00 Filing Fee \$\$130.00 Filing Fee & Certified Copy Certified Copy Certified Copy Contribute Contrib
(additional copy is enclosed) 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

•:"



May 14, 2018

ANTWON FULTON 3511 NW 36 AVE LAUDERDALE LAKES, FL 33309

SUBJECT: FUDUH \$ ENTERTAINMENT L.L.C

Ref. Number: W18000045405

We have received your document for FUDUH \$ ENTERTAINMENT L.L.C 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 designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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.

Letter Number: 918A00009974

DANIEL L O'KEEFE Regulatory Specialist II

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Fuduh# Futev (Must contain the wo	HAINMENT L.L.C	ny. "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of t	he principal office of the Limi	ted Liability Company is:	
Principal Office A	Address:	Mailing Address:	
3511 NW 36 AV	I P	- Same	
201 KM 30 MV			
ARTICLE III - Registered Agent, Regist			
ARTICLE III - Registered Agent, Registered Limited Liability Company cannot send the business entity with an active Flor	tered Office, & Registered A rve as its own Registered Ager ida registration.)		18 HAY -8 PH
ARTICLE III - Registered Agent, Registered Limited Liability Company cannot send the business entity with an active Flor	tered Office, & Registered A rve as its own Registered Agerida registration.) The registered agent are:		18 MAY -8 PM 12:
ARTICLE III - Registered Agent, Regist The Limited Liability Company cannot senother business entity with an active Flor The name and the Florida street address of A	tered Office, & Registered A rve as its own Registered Agerida registration.) The registered agent are:	nt. You must designate an individual fine Concern and Indi	18 HAY -8 PH 12: 49
ARTICLE III - Registered Agent, Regist The Limited Liability Company cannot sen another business entity with an active Flor The name and the Florida street address of AAA. 3511 Florida	tered Office, & Registered A rve as its own Registered Agerida registration.) The registered agent are: LON FINANCE Name NW 310AVE	nt. You must designate an individual fine Concern and Indi	18 MAY -8 PM 12: 49

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)

"AMBR" = Authorized Member "MGR" = Manager	Name and Address:
Ansa	Antwood Fulton 3511 NH 36AUP LANCEDOR LAKES
MGR	Berniel Lafontant Join Ald DiaAve Landerdale Lates
MGR	Kenyetta Fultan
(Use attachment if necessary) TCLE V: Effective date, if other than the date	of filling: (OPTIONALLY)
late of filing.)	ecific and cannot be more than five business days priess or 90 days and neet the applicable statutory filing requirements, this date will not be like
ibeament's effective date on the Department	or State 3 records.
ICLE VI: Other provisions, if any.	
TCLE VI: Other provisions, if any. REQUIRED SIGNATURE:	
Signature of a me This document is execut I am aware that any false	ember or an authorized representative of a member. ted in accordance with section 605.0203 (1) (b), Florida Statutes, e information submitted in a document to the Department of State e felony as provided for in s.817.155, F.S.
REOUIRED SIGNATURE: Signature of a me This document is execut I am aware that any false	ted in accordance with section 605.0203 (1) (b), Florida Statutes, e information submitted in a document to the Department of State e felony as provided for in s.817.155, F.S.

ARTICLE IV-