## L19000055546

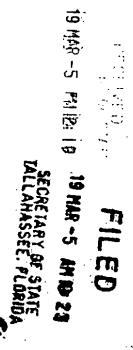
(Requestor's Name)
(Address)
(Addicas)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
<b>,</b>
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500325660725

03/05/19--01013--013 \*\*125.00



T SCHROEDER

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

			+	
Baisden Entertainm	ent, LLC			
			_	
			_	
			A	ert of Inc. File
	,		ا ل	TD Partnership File
			F	oreign Corp. File
			L	C. File
			F	ictitious Name File
			т	rade/Service Mark
			N	derger File
			A	Art, of Amend, File
			R	A Resignation
			0	Dissolution / Withdrawal
			A	Annual Report / Reinstatement
			0	Cert. Copy
			P	Photo Copy
			<	Certificate of Good Standing
			(	Certificate of Status
			0	Certificate of Fictitious Name
			0	Corp Record Search
			0	Officer Search
			F	fictitious Search
Signature			-   F	ictitious Owner Search
<b>V</b>			<u> </u>	Vehicle Search
	<del></del>	<del></del>	I	Driving Record
Requested by: Seth	03/05/19		J 1	UCC 1 or 3 File
Name		Time	(	UCC 11 Search
			1	UCC 11 Retrieval
Walk-In	Will Pick Up		(	Courier

## Baisden Entertainment, Inc. 1550 Madruga Avenue Suite 120 Coral Gables, FL 33146

March 4, 2019

Florida Secretary of State

Re: Baisden Entertainment, LLC

Gentlemen:

We have been notified that the above name is too similar to the name Baisden Entertainment, Inc. which we are having filed with you under document number P19000003565.

The same principal is the owner of both entities.

We give you permission for the use of the name of Baisden Entertainment, LLC, and for you to file the articles of organization for Baisden Entertainment, LLC.

Very truly yours,

Baisden Entertainment, In

Michael Baisden, President

	Baisden Ent	tertainment, LLC
	(Must contain the words "Limited Liabili	
RTICLE II - A		
he mailing addre	ss and street address of the principal office o	of the Limited Liability Company is:
	Principal Office Address:	Mailing Address:
Cor: RTICLE III - R	O Madruga Avenue, Suite 120 al Gables, FL 33146 egistered Agent, Registered Office, & Reg lity Company cannot serve as its own Regist ntity with an active Florida registration.)	coral Gables, FL 33146  gistered Agent's Signature: tered Agent. You must designate an individual or
RTICLE III - R the Limited Liabi other business e	egistered Agent, Registered Office, & Reg	gistered Agent's Signature: tered Agent. You must designate an individual or
RTICLE III - R the Limited Liabi other business e	egistered Agent, Registered Office, & Reg lity Company cannot serve as its own Regist ntity with an active Florida registration.)	coral Gables, FL 33146 gistered Agent's Signature: tered Agent. You must designate an individual or are: are:
RTICLE III - R the Limited Liabi other business e	egistered Agent, Registered Office, & Reg lity Company cannot serve as its own Regist ntity with an active Florida registration.)	coral Gables, FL 33146 gistered Agent's Signature: tered Agent. You must designate an individual or are: are:
RTICLE III - R the Limited Liabi other business e	egistered Agent, Registered Office, & Reg lity Company cannot serve as its own Regist ntity with an active Florida registration.)  Florida street address of the registered agent.  Mark L. R  Name	coral Gables, FL 33146 gistered Agent's Signature: tered Agent. You must designate an individual or are: are:
RTICLE III - R the Limited Liabi other business e	egistered Agent, Registered Office, & Reg lity Company cannot serve as its own Regist ntity with an active Florida registration.)  Florida street address of the registered agent.  Mark L. R  Name	coral Gables, FL 33146  gistered Agent's Signature: tered Agent. You must designate an individual or are:  ivlin, P.A.  e venue, Suite 120
RTICLE III - R the Limited Liabi other business e	egistered Agent, Registered Office, & Reg lity Company cannot serve as its own Regist ntity with an active Florida registration.)  Florida street address of the registered agent  Mark L. R  Name  1550 Madruga A  Florida street address (P.O.	coral Gables, FL 33146  gistered Agent's Signature: tered Agent. You must designate an individual or are:  ivlin, P.A.  e venue, Suite 120

110 plefw 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)

me MPA



٠.				
	ARTICLE IV- The name and address of e	ach person authorize	rd to manage and control the Limited Liability Company:	
	<u>Title:</u> "AMBR" = Authorized Me	mher	Name and Address:	
	"MGR" = Manager  MGR	mee	Baisden Entertainment, Inc.	
			1550 Madruga Avenue, Suite 120 Coral Gables, FL 33146	
ARTIC	(Use attachment if necessary	than the date of filing	::(OPTIONAL)	
(If an ef the date <u>Note:</u> I the docu	LEV: Effective date, if other fective date is listed, the date of filing.) If the date inserted in this blocument's effective date on the l	than the date of filing must be specific an k does not meet the Department of State'	nd cannot be more than five business days prior to or 90 applicable statutory filing requirements, this date will not	
(If an ef the date <u>Note:</u> I the docu	LE V: Effective date, if other fective date is listed, the date of filing.) If the date inserted in this blocument's effective date on the late VI: Other provisions, if any	than the date of filing must be specific an k does not meet the Department of State'	nd cannot be more than five business days prior to or 90 applicable statutory filing requirements, this date will not	
(If an ef the date <u>Note:</u> I the docu	LE V: Effective date, if other fective date is listed, the date of filing.) If the date inserted in this blocument's effective date on the late VI: Other provisions, if any	than the date of filing must be specific an k does not meet the Department of State'	nd cannot be more than five business days prior to or 90 applicable statutory filing requirements, this date will not 's records.	
(If an ef the date <u>Note:</u> I the docu	LE V: Effective date, if other fective date is listed, the date of filing.) If the date inserted in this blocument's effective date on the late VI: Other provisions, if any	than the date of filing must be specific an k does not meet the Department of State'	nd cannot be more than five business days prior to or 90 applicable statutory filing requirements, this date will not 's records.	
(If an ef the date <u>Note:</u> I the docu	LE V: Effective date, if other fective date is listed, the date of filing.) If the date inserted in this blocument's effective date on the late VI: Other provisions, if any REQUIRED SIGNATURE Signat This docume I am aware the	than the date of filing must be specific an k does not meet the Department of State's.  :  ure of a member or ent is executed in account any false informathird degree felony:	applicable statutory filing requirements, this date will not 's records.  The an authorized representative of a member cordance with section 605.0203 (1) (b), Florida factorial submitted in a document to the Department factorials provided for in s.817.155, F.S.	
(If an ef the date <u>Note:</u> I the docu	LE V: Effective date, if other fective date is listed, the date of filing.) If the date inserted in this blocument's effective date on the late VI: Other provisions, if any REQUIRED SIGNATURE Signat This docume I am aware the	than the date of filing must be specific an k does not meet the Department of State's.  :  ure of a member or ent is executed in account any false informathird degree felony:	applicable statutory filing requirements, this date will not 's records.  r an authorized representative of a member. cordance with section 605.0203 (1) (b). Florida Santas. attion submitted in a document to the Department (1.20) to 1.00.	

f.,