

L19000140658

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

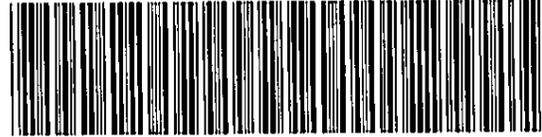
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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19 JUN -3 PM 1:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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N CULLIGAN

6/3/19

COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: Son of Mars Pictures, LLC.  
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:

Marcos Edgardo Rodriguez Alvarez  
Name of Person  
Son of Mars Pictures, LLC.  
Firm/Company  
9200 Bay Harbor Terrace #2A  
Address  
Bay Harbor Islands / Florida 33154  
City/State and Zip Code  
marcosr1@me.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marcos F. Rodriguez Alvarez 954 401-8829  
Name of Person at ( ) Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & 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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 16, 2019

MARCOS EDGARDO RODRIGUEZ ALVAREZ  
9200 BAY HARBOR TERRACE #2A  
BAY HARBOR ISLANDS, FL 33154

SUBJECT: SON OF MARS PICTURES, LLC.  
Ref. Number: W19000048266

2019 JUN -3 AM 11:02

We have received your document for SON OF MARS PICTURES, LLC. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 219A00009926

RETURNING DOCUMENT AS REQUESTED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Son of Mars Pictures, 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:

9200 Bay Harbor Terrace, #2A  
Bay Harbor Islands, FL 33154

9200 Bay Harbor Terrace, #2A  
Bay Harbor Islands, FL 33154

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:

Marcos Edgardo Rodriguez Alvarez  
Name

9200 Bay Harbor Terrace #2A  
Florida street address (P.O. Box **NOT** acceptable)

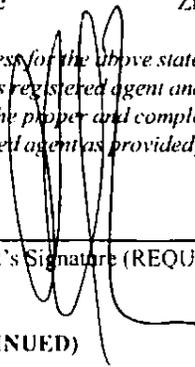
Bay Harbor Islands      Florida      33154  
City                      State                      Zip

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)

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

Manager

**Name and Address:**

Marcos Edgardo Rodriguez Alvarez  
9200 Bay Harbor Terrace #2A  
Bay Harbor Islands, FL 33154

\_\_\_\_\_  
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STATE OF FLORIDA  
TALLAHASSEE

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: April 30th, 2019. (OPTIONAL)

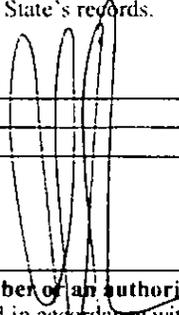
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**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.

Marcos Edgardo Rodriguez Alvarez  
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)