Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000321168 3)))



H200003211683ABCX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:					
	Division of Co	rporations			
	Fax Number	: (850)617-6381		골유	2020
From:				 	
	Account Name	: LAZARUS CORPO	RATE FILING SERVICE.	INC. 357	SEP
	Account Number	: I200000000019	ĺ	(S)	
	Phone	: (305)552-5973		50.	5
	Fax Number	: (3 0 5)675-5944		.n.	75
				-	Ŧ.
*Enter t	he email addres	ss for this busin	ess entity to be use	ed for futur	e <u>-</u> -
			one email address p		ð
Ema	il Address:				
	 -			 	

FLORIDA LIMITED LIABILITY CO. ICE COLD MULTIMEDIA, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

2920 SEP 15 PM 4: 09

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED 2020 SEP 15 PM 4: 46

ARTICLE I - Name:
The name of the Limited Liability Company is:

ICE COLD MUCTIMEDIA, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability

Company is:

DON A. HOLDEN JR. 2301 NW 132 ST MTAMT, FL 33167

ARTICLE III - Registered Agent, Registered Office:

The name and the Florida street address of the registered agent are: (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.)

DONA. HOLDEN JR. 2301 NW 132 ST MIAMI, 76 33167

ARTICLE IV

The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)

YON H. HOLIYEN SICI (AMBR)

Required Signatures:

Signature of a member or an author accordance with section 605	rizod
accordance with section 60	need representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.

DON A. HOLDEN JR.

Typed or printed name of signee

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)