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	New Filing Sec Division of Cor							
SUBJEC		uctions LLC						
SUBJEC	1.	Name	of Lim	ited Liab	lity Company			
The enclo	sed Articles of	Organization and fe	c(s) are	submitte	d for filing.			
Please ret	urn all correspo	indence concerning i	this mat	iter to the	following:			
	Lillie Thom							
			-	Name o	f Person			
	Kühar Produ	ctions LLC					~ ~	
				Firm/C	ompany			EL AON LEG
	290 E Camin	o Real						
				Add	ress			
	Boca Raton,	FL 33432					· ·	<i>ان</i>
	lthom9@aol.c	om	Ci	ty/State a	nd Zip Code			****
	E	i-mail address: (to b	e used l	for future	annual report notificat	ion)		
For further	information cor	accoming this matter,	please	call:				
	Lillie Thom		561	l	542-1112			
	Name	e of Person			Daytime Telephon			
Enclosed	is a check for th	se following amount	:					
□\$125.0	0 Filing Fee	. \$130.00 Filing Certificate of Stat		Certif	55.00 Filing Fee & ied Copy nal copy is enclosed)	\$160.001 Certificate of Certified Co (additional co	of Status & py	
	New Fi Divisio P.O. Be	g Address ling Section on of Corporations ox 6327 ussee, FL 32314			Street Address New Filing Section De The Centre of Tallaha 2415 N. Monroe Stre Tallahassee, FL 3230	issee et, Suite 810		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Kühar Productions I					
(Must con	tain the words "Limited L	iability Company, "	L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street a	ddress of the principal of	fice of the Limited I	Liability Company is:		
<u>Princip</u>	al Office Address:		Mailing Address:	:	
290 E Camino Real		290 E	Camino Real		
Boca Raton, FL 334	32	Boca	Raton, FL 33432		
ARTICLE III - Registered Ag (The Limited Liability Company another business entity with an The name and the Florida street	y cannot serve as its own l active Florida registration	Registered Agent. Y 1.)		dual or	ara nov 19
					=
	Lillie Thom			1 Ta 14	<u></u>
		Name			
	290 E Camino Real	Name	· 		TD E
	290 E Camino Real Florida street address		ceptable)	a1 	ာဥ ငှာ
			33432	#7 " 	TD E

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.,

sered 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	Name and Address:
"MGR" = Manager	
MGR	Lillic Thom
	290 E Camino Real Boca Raton, FL 33432
	TO Y
	9
	
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	b
e date of filing.)	the date of filing: <u>January</u> 1 ⁵ , <u>2021</u> (OPTIONAL) it be specific and cannot be more than five business days prior to or 90 days a ces not meet the applicable statutory filing requirements, this date will not be list rement of State's records.
RTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
This document is I am aware that a	of a member or an authorized representative of a member. Executed in accordance with section 605.0203 (1) (b). Florida Statutes, by false information submitted in a document to the Department of State 1 degree felony as provided for in s.817.155, F.S.
Lillie Thor	
	<u>m</u>
	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)