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	(Re	questor's Name)	
-	(Add	dress)	
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_	(Cit	y/State/Zip/Phon	e #)
PIC	CK-UP	☐ WAIT	MAIL
 	(Bu:	siness Entity Nai	me)
	(Do:	cument Number)	
Certified Copies	i	_ Certificate:	s of Status
Special Instru	ctions to	Filing Officer:	

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T. SCOTT



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SECKLIARY OF STATE

	New Filing Section Division of Corporations				
SUBJECT	TMoneyMusicProduction LL	.C			
5020110		e of Lir	mited Liabilit	y Company	
The enclo	sed Articles of Organization and	fee(s) ar	re submitted f	or filing.	
Please reti	urn all correspondence concerning	g this m	atter to the fo	llowing:	
	Lathash Ingram				
			Name of F	erson	
	TMoneyMusicProduction LLC	•			
			Firm/Con	npany	
	110 Keystone Plaza				
			Addre	SS	
	Panama City, Fl 32404				
			City/State and	Zip Code	
	Tmonemusic02@gmail.com	ha usas	l for future or	nual report notificati	ion)
For further	information concerning this matter			nual report notificati	ony
	Lathash Ingram	8 at (13	3528249	
	Name of Person	_ `_	rca Code	Daytime Telephon	e Number
Enclosed :	is a check for the following amou	nt:			
□\$125.0	0 Filing Fee ☐\$130.00 Filin Certificate of S		Certifie	00 Filing Fee & d Copy copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address			treet Address Vew Filing Section Di	iviolon
	New Filing Section Division of Corporations P.O. Box 6327		T	he Centre of Tallaha 415 N. Monroe Stree	issee

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

,
lity Company, "L.L.C.," or "LLC.")
of the Limited Liability Company is:
Mailing Address:
8741 Vamos Rd
o, i valios ita

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:

Ţ

Latasha Ingram White		
	Name	
8741 Vamos Rd		
Florida street addres	ss (P.O. Box <u>NOT</u> ac	eceptable)
Sarasota	FL	34231
City	State	Zip

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 by position as registered agent as provided for in Chapter 605, F.S.,

(CONTINUED)

Registered Agent's Signature (REQUIRED)

•	ARTICLE IV
	The name and

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

Title:		Name and Address:	
"AMBR" = Authorize "MGR" = Manager	d Member		
MGR	<u> </u>	Lathash Ingram 110 Kevstone Plaza Panama, FL 32404	_ _ _
	_		- - -
	_		_
			_ _ _
(Use attachment if nec	other than the date of		0. Januar 6 Ann
he date of filing.)	is block does not m	ecific and cannot be more than five business days prior to or 90 meet the applicable statutory filing requirements, this date will not of State's records.	_
ARTICLE VI: Other provisions	s, if any.		
REOUIRED SIGNA	TURE:		
This o	document is execute aware that any false	ember or an authorized representative of a member. ted in accordance with section 605.0203 (1) (b). Florida Statutes, a information submitted in a document to the Department of State te felony as provided for in s.817.155, F.S.	

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Lathash Ingram