

221000146374

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

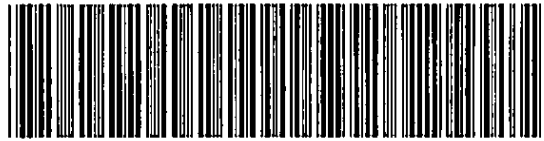
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FL

2021 APR -5 AM 7:28

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221000146374

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Peltz Media Productions LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fees are submitted for filing

Please return all correspondence concerning this matter to the following

Jason Samuel Peltz

Name of Person

Peltz Media Productions LLC

Firm Company

6447 Point Hancock Dr

Address

Winter Garden FL 32787

City, State and Zip Code

flamazingjp@yahoo.com

E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call

Jennifer Peltz

407

595-7419

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount

☒ \$125.00 Filing Fee

☐ \$150.00 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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is

Peltz Media Productions LLC

(Must contain the words "Limited Liability Company," "LLC," or "L.L.C.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

6447 Point Hancock Dr

Winter Garden, FL 34787

6447 Point Hancock Dr

Winter Garden, FL 34787

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

Jason Peltz

Name

6447 Point Hancock Dr

Florida street address (P.O. Box NOT acceptable)

Winter Garden

FL

34787

City

State

Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company in the place designated in this certificate, I hereby accept the appointment as registered agent and agree to perform the duties of a registered agent and 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 607, Florida Statutes.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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2021 APR 5 AM 7:28
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF WINTER GARDEN, FL

ARTICLE IV-

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

Title:

"AMBR" - Authorized Member

"MGR" - Manager

MGR

Name and Address:

Jason Peltz

6447 Point Hancock Dr

Winter Garden, FL 34787

AMBR

Jennifer Peltz

6447 Point Hancock Dr

Winter Garden, FL 34787

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing 28 2021 (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 Statute
I am aware that any false information submitted in a document to the Department of State
constitutes a third degree felony provided for in s 817.155, F.S.

Jason Peltz

Typed or printed name of signer

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)

2021 APR -5 AM 7:28

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