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COVER LETTER

Div	vision of Co	orporations				
SUBJECT:		e Studios, LLC				
		Name	of Limited List	ility Company		
The enclose	d Anicles o	f Organization and fee	e(s) are submitt	ed for filing.		
Please return	n all corresp	ondence concerning t	his matter to the	e following:		
	John Ainsw	onth, Esq.				
-			Name	of Person		
	Ainsworth .	& Clancy, PLLC				
-		··-s-	Firm/C	Company	• •	
;	801 Brickel	l Ave. 8th Floor				
-			Ado	dress		
	Miami, FL	33131				
- i-	nfo@busine	Es asa som	City/State :	and Zip Code		.
-11			used for future	annual report notificat	ion)	
ar Kurkar inf		oncerning this matter,		aman report not near	ionj	··
or runnier im	ornation co	meering this natter, j	picase can:			: -
J .	ohn Ainswo		305 at (600-3816)		
	Nan	oc of Person	Area Code	Daytime Telephon	e Number	
Enclosed is a	check for t	he following amount:				
■\$ 125.00 F	iling Fee	□\$130.00 Filing F Certificate of Statu	s Certi	55.00 Filing Fee & fied Copy nal copy is enclosed)	☐\$160.00 Fil Certificate of Certified Cop (additional copy	Status & y
		ig Address iling Section		Street Address New Filing Section Di	ivision	
	Division P.O. B	on of Corporations fox 6327 assee, FL 32314		The Centre of Tallaha 2415 N. Monroe Stre- Tallahassee, FL 3230	issee et, Suite 810	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2191 JUN - 1	йН l0: 16
	TATE

ART	TCLE	I - N	ame:

Next Wave Studios, LLC	
(Must contain the words "Limited Liab	lity Company, "L.L.C.," or "LLC.")
RTICLE II - Address:	
W 1 C 121 11 - Add C33.	
he mailing address and street address of the principal office	of the Limited Liability Company is:
	of the Limited Liability Company is: Mailing Address:
he mailing address and street address of the principal office	

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:

Ainsworth & Clancy	, PLLC	
	Name	
801 Brickell Ave, 8t	h Floor	
Florida street addres	s (P.O. Box <u>NOT</u> a	cceptable)
Miami	FL	33131
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 my position as registered agent as provided for in Chapter 605, F.S.

(CONTINUED)

Title: "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager MGR	Andrew Jenkins	
	1100 Brickell Bay Drive #310747 Miami, FL 33231	

(1)		
(Use attachment if necessary)		
TICLE V: Effective date, if other than the da	ate of filing: (OPTIONAL)	c aftou
PICLE V: Effective date, if other than the din effective date is listed, the date must be late of filling.) e: If the date inserted in this block does no	specific and cannot be more than five business days prior to or 90 day of meet the applicable statutory filing requirements, this date will not be in	
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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)

John Ainsworth, Esq. - Legal Representative
Typed or printed name of signee