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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAI	L
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

RISING MUSIC,	LLC		
			
			Art of Inc. File
			LTD Partnership File
			Foreign Corp. File
			L.C. File
			Fictitious Name File
			Trade/Service Mark
			Merger File
			Art, of Amend, File
			RA Resignation
			Dissolution / Withdrawal
			Annual Report / Reinstatement
			Сеп. Сору
			Photo Copy
			Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
			Officer Search
			Fictitious Search
6:			Fictitious Owner Search
Signature			Vehicle Search
		. _	Driving Record
Requested by: SET	"H		UCC 1 or 3 File
			UCC 11 Search
Name	Date	Time	UCC 11 Retrieval
Walk-In	Will Pick	Up	Courier

COVER LETTER

	New Filing Sec Division of Cor				
SUBJEC		USIC, LLC			
SUBJEC	-1:	Nan	ne of Limited 1	Liability Company	
The encl	osed Articles of	Organization and	fee(s) are subr	nitted for filing.	
Please re	turn all correspo	ondence concernin	g this matter to	the following:	
	JESSICA M	OLINA			
	•		Na	me of Person	
	TIBER SER	VICES, LLC			
			Fir	m/Company	
	2434 HOLL	YWOOD BLVD.	2ND FLOOR		
				Address	
	HOLLYWO	OD, FL 33020			
	CLIENTS@T	TBERSERVICES	•	ate and Zip Code	
		E-mail address: (to	be used for fu	iture annual report notif	ication)
For furthe	r information co	ncerning this matt	er, please call:		
	JESSICA MO	OLINA	954 at (7444051)	
	Nam	ne of Person		ode Daytime Telep	
Enclose	d is a check for t	he following amou	int:		
	00 Filing Fee	□\$130.00 Filir Certificate of S	g Fee & [tatus (□\$155.00 Filing Fee & Certified Copy ditional copy is enclose	Certificate of Status &
	New F Divisi	ng Address Filing Section on of Corporations Box 6327	\$	Street Address New Filing Section The Centre of Ta	
		assee, FL 32314		Tallahassee, FL	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2021 AUG 17 AH IO: 54 TOJA JAMES FATE

Mailing Address:

The name of the Limited Liability Company is:

RISING MUSIC, LLC

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

ARTICLE II - Address:

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

TIBER SERVICES, LLC	TIBER SERVICES, LLC
2434 HOLLYWOOD BLVD, 2ND FLOOR	2434 HOLLYWOOD BLVD, 2ND FLOOR
HOLLYWOOD, FL 33020	HOLLYWOOD, FL 33020

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:

Principal Office Address:

TIBER SERVICES, I	LLC	
	Name	
2434 HOLLYWOOD	BLVD, 2ND FLO	OR
Florida street address	s (P.O. Box <u>NOT</u> ac	cceptable)
HOLLYWOOD	FL	33020
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..

JESSICA MOLINA	
Registered Agent's Signature (REQUIRED)	

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Memb	Name and Address:
"MGR" = Manager	CI CI
MGR	TIBER SERVICES, LLC 2434 HOLLYWOOD BLVD, 2ND FLOOR HOLLYWOOD, FL 33020
	1363
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·	A: 0: 5
(Use attachment if necessary)	
(If an effective date is listed, the date n the date of filing.)	an the date of filing:
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	JESSICA MOLINA
This documer I am aware the	re of a member or an authorized representative of a member. It is executed in accordance with section 605.0203 (1) (b), Florida Statutes, at any false information submitted in a document to the Department of State hird degree felony as provided for in s.817.155, F.S.
<u>JESSIC</u>	CA MOLINA
	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)