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(R	equestor's Name)
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	WAIT MAIL
(B	usiness Entity Name)
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Certified Copies	Certificates of Status
Special Instructions to	• Filing Officer:
	Office Use Only



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# **COVER LETTER**

TO: New Filing Section Division of Corporations

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SUBJECT: Alist Starz LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

	U
Juming Delmas	
Name o	of Person
Alist Starz LLC	
Firm/C	Company
6397 Bombadil Drive	
Ad	dress
Tallahassee, FL 32303	
City/State a entertainment@aliststarz.com	and Zip Code
E-mail address: (to be used for future	annual report notification)
For further information concerning this matter, please call:	
Juming Delmas at 772	,9713322
Name of Person Area Code	Daytime Telephone Number
Enclosed is a check for the following amount:	
Certificate of Status Certi	55.00 Filing Fee &□\$160.00 Filing Fee,fied CopyCertificate of Status &onal copy is enclosed)Certified Copy(additional copy is enclosed)
Mailing Address	Street Address
New Filing Section	New Filing Section Division

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

Alist Starz LLC

(Must contain the words "Limited Liability Company, "L.L.C.," 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:
7901 4th St N STE 300	7901 4th St N STE 300
St. Petersburg FL	St. Petersburg FL 33702
7901 4th St N STE 300, St. Petersburg, FL 33702	7901 4th St N STE 300, St. Petersburg, FL 33702

# 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:

Registered Age	ents Inc.	
	Name	
7901 4th S	St N STE	300
Florida street address	(P.O. Box <u>NOT</u> a	cceptable)
St. Petersburg	FL _	33702
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. 1 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..

Beet Hame Registered Agent's Signature (REQUIRED)

(CONTINUED)

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### ARTICLE IV-

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

Title:	Name and Address:		
"AMBR" = Authorized Member			
"MGR" = Manager			
AMBR	Juming Delmas		
	6397 Bombadil Drive		
	Tallahassee FL 32303		
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(Use attachment if necessary)

. (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing. \_

(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.

Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.
Juming Delmas
Typed or printed name of signee

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)