

Division of Corporations

12/28/21, 3:35 PM

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : FLORIDA ENTREPRENEUR LAW, P.A.
Account Number : I20190000063
Phone :
Fax Number (954) 882-4119 :
(954) 400-5096

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: paopaulitapao@hotmail.com

FLORIDA LIMITED LIABILITY CO.

~~THE WOLF HOUSE, LLC~~

WOLF HOUSE
PRODUCTIONS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

FILED
2022 FEB 10 10 30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTE: This filing was rejected because of a business name that already exists with this name. I am refileing so that our Sunbiz e-file account isn't charged again for the same entity. We are submitting with all of the same information except the Client has agreed to change the name of the business to WOLF HOUSE PRODUCTIONS, LLC.

COVER LETTER

(((H21000470238 3)))

TO: New Filing Section
Division of Corporations

SUBJECT: WOLF HOUSE PRODUCTIONS, 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:

PAULA MARTINEZ

Name of Person

WOLF HOUSE PRODUCTIONS, LLC

Firm/Company

601 SW 11th Street, Apt. 1E

Address

Miami, FL 33129

City/State and Zip Code

paopaulitapao@hotmail.com

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

For further information concerning this matter, please call:

Michelle Suarez, Esq. at (954) 882-4119

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount: (Deduct from Sunbiz E-File Account No.: I20190000063)

☒ \$125.00 Filing Fee

☐ \$130.00 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:

WOLF HOUSE PRODUCTIONS, 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:

Principal Office Address:601 SW 11th Street, Apt. 1E
Miami, FL 33129Mailing Address:601 SW 11th Street, Apt. 1E
Miami, FL 33129

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:

Florida Entrepreneur Law, P.A.

Name


101 NE 3rd Ave., Suite 1500Florida street address (P.O. Box **NOT** acceptable)Fort LauderdaleFL33301

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 am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.



Michelle K. Suarez, Esq., signing on behalf of Florida Entrepreneur Law, P.A.

Registered Agent's Signature (REQUIRED)

2022 FEB 19 AM 1:30
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

PAULA MARTINEZ

601 SW 11th Street, Apt 1E

Miami, FL 33129

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 12/28/2021. (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.

The Company shall be Member Managed and shall be operated in accordance with the terms of the Operating Agreement on file with the Company, as amended from time to time.

REQUIRED SIGNATURE:

/s/ Paula Martinez (electronically signed)

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.

Paula Martinez

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)

S 5.00 Certificate of Status (Optional)

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2022 FEB 10 AM 1:30
CLERK OF STATE
TALLAHASSEE, FLORIDA