

L22 000359219

(Requestor's Name)

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(City/State/Zip/Phone #)

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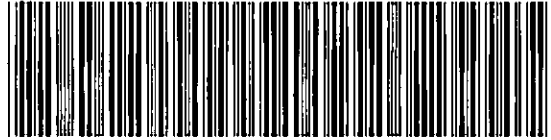
(Business Entity Name)

(Document Number)

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Account#: I20000000088

Date: 08/17/2022

Name: Jennifer Bialowas

Reference #: 1330178

Entity Name: BORN SAD MUSIC, LLC

☒ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☒ Other Upon filing please provide a certified copy

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Authorized Amount: 155.00

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TALLAHASSEE, FL 32301
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Signature: [Signature]

**ARTICLES OF ORGANIZATION FOR FLORIDA
LIMITED LIABILITY COMPANY**

ARTICLE I - Name

The name of this limited liability company (the "Company") is Born Sad Music, LLC.

ARTICLE II - Address

The mailing address and street address of the principal office of the Company are:

6853 SW 18th Street, m-320
Boca Raton, Florida 33433

ARTICLE III - Existence and Duration

The Company shall commence its existence on the date that these Articles of Organization are filed with the Department of State, and its duration shall be perpetual unless sooner dissolved by law.

ARTICLE IV - Management

The company shall be a manager-managed Company in accordance with the Operating Agreement of the Company. The initial manager of the Company and his address are:

Jager Bonham
6853 SW 18th Street, m-320
Boca Raton, Florida 33433

ARTICLE V – Registered Agent

The name and Florida street address of the initial registered agent of the Company are:

Hahn & Glick CPAs, PA
6853 SW 18th Street, m-320
Boca Raton, Florida 33433
Attn: Scott Glick

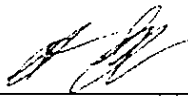
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STATE
TALLAHASSEE, FLORIDA

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, Florida Statutes.

Hahn & Glick CPAs, PA, Registered Agent

By: 
Name: Scott Glick
Title: Authorized Person

REQUIRED SIGNATURE:



Scott Glick
Authorized Representative of a Member

(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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 section 817.155, Florida Statutes.)

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