# 0352641

| ·                                       | (Requestor's Name)       |  |  |
|---|--------------------------|--|--|
|   | (Address)                |  |  |
|   | (Address)                |  |  |
| <del></del>                             | (City/State/Zip/Phone #) |  |  |
| PICK-UP                                 | MAIL MAIL                |  |  |
|   | (Business Entity Name)   |  |  |
|   | (Document Number)        |  |  |
| Certified Copies                        | Certificates of Status   |  |  |
| Special Instructions to Filing Officer: |                          |  |  |
|   |                          |  |  |
|   |                          |  |  |
|   |                          |  |  |
|   |                          |  |  |

Office Use Only



600430635636

2024 AUG 15 PM 1: 05

AUG 1 5 2924 K. Brumbley

### FLORIDA FILING & SEARCH SERVICES, INC.

## P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

08/15/2024

NAME: BK KB MUSIC LLC

TYPE OF FILING: ARTICLES

COST: 125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

#### COVER LETTER

| TO:        | New Filing Sec<br>Division of Cor |   |        |            |   |   |
|------------|-----------------------------------|---|--------|------------|---|---|
| SUBJEC     | BK KB Mi                          | isic LLC  |        |            |   |   |
| 30133120   |                                   | Name of I   | imite  | d Liabilit | y Company   |   |
| The encl   | osed Articles of                  | Organization and fee(s)   | are su | bmitted !  | for filing.   |   |
| Please re  | turn all correspo                 | ondence concerning this   | matter | to the fo  | llowing:  |   |
|            | Lee Schauer                       |   |        |            |   |   |
|            |                                   |   | ١      | lame of l  | Person  |   |
|            | Goodman G                         | enow Schenkman Smell  | cinson | + Christ   | opher, LLP  |   |
|            | ·                                 |   | ]      | Firm/Con   | npany   |   |
|            | 9665 Wilshi                       | re Blvd., Fifth Floor   |        |            |   |   |
|            |                                   |   |        | Addre      | ss  |   |
|            | Beverly Hill                      | s, CA 90212   |        |            |   |   |
|            |                                   | •   | City/  | State and  | Zip Code  |   |
|            | lces@ggssc.c                      | E-mail address: (to be us   | ed for | future aı  | mual report notification  | on)   |
| For furthe |                                   | ncerning this matter, ple   |        |            | ·   | •   |
|            | Lee Schauer                       | at (  | 310    |            | 859-6880  |   |
|            | Nam                               | e of Person   |        | Code       | Daytime Telephone   | Number  |
| Enclosed   | l is a check for t                | he following amount:  |        |            |   |   |
|            | 00 Filing Fee                     | □\$130.00 Filing Fee<br>Certificate of Status                                     |        | Certifie   | .00 Filing Fee &<br>d Copy<br>I copy is enclosed)   | □\$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|            | New F<br>Divisio<br>P.O. B        | ng Address<br>illing Section<br>on of Corporations<br>Box 6327<br>assee, FL 32314 |        | -          | Street Address New Filing Section Dir The Centre of Tallaha 2415 N. Monroe Stree Tallahassee, FL 3230 | ssee<br>et, Suite 810   |

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

|  | LLC   | 3.175 · G- ·  | 47 1 C 2 47 I C 25                                  |  |
|--|---|---|---|--|
| (MI  | st contain the words "Limited Li  | ability Company,  | "L.L.C.," of "LLC.")                                |  |
| RTICLE II - Address:   |   |   |   |  |
| he mailing address and   | street address of the principal offi  | ce of the Limited                                       | Liability Company is:                               |  |
| <u> </u>   | rincipal Office Address:  |   | Mailing Address:                                    |  |
| 9665 Wilshire  | Blvd., Fifth Floor  | 9665  | Wilshire Blvd., Fifth Floor                         |  |
|  |   |   | Beverly Hills, CA 90212                             |  |
| he Limited Liability Co<br>other business entity w                             | ed Agent, Registered Office, &  | Registered Agent.                                       |   |  |
| RTICLE III - Register<br>The Limited Liability Con<br>nother business entity w | ed Agent, Registered Office, & empany cannot serve as its own R ith an active Florida registration.  street address of the registered a   | Registered Agent.                                       | nt's Signature:                                     |  |
| RTICLE III - Register<br>The Limited Liability Con<br>nother business entity w | red Agent, Registered Office, & ompany cannot serve as its own R ith an active Florida registration.  street address of the registered a Paracorp Incorporated                          | Registered Agent.                                       | nt's Signature:                                     |  |
| RTICLE III - Register<br>The Limited Liability Con<br>nother business entity w | red Agent, Registered Office, & ompany cannot serve as its own R ith an active Florida registration.  street address of the registered a Paracorp Incorporated                          | Registered Ager<br>egistered Agent. '<br>)<br>gent are: | nt's Signature:                                     |  |
| RTICLE III - Register<br>The Limited Liability Con<br>nother business entity w | red Agent, Registered Office, & ompany cannot serve as its own R ith an active Florida registration.  street address of the registered a Paracorp Incorporated                          | Registered Ager<br>egistered Agent. '<br>)<br>gent are: | nt's Signature:<br>You must designate an individual |  |
| RTICLE III - Register<br>The Limited Liability Con<br>nother business entity w | red Agent, Registered Office, & impany cannot serve as its own R ith an active Florida registration.  street address of the registered a  Paracorp Incorporated  155 Office Plaza Drive | Registered Ager<br>egistered Agent. '<br>)<br>gent are: | nt's Signature:<br>You must designate an individual |  |

See Attached

Registered Agent's Signature (REQUIRED)

(CONTINUED)

APPROVED

#### ARTICLE IV-

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

| · Tit                       |  | Name and Address:  |
|-----------------------------|--|--|
|                             | MBR" = Authorized Member GR" = Manager           |  |
|                             | <del>-</del>                                     | 0.0147   |
| <u> </u>                    | MBR  | Bill Kahan Kapri 9665 Wilshire Blvd., Fifth Floor  |
|                             |  | Beverly Hills, CA 90212  |
|                             |  |  |
|                             |  |  |
|                             |  |  |
|                             |  |  |
|                             |  |  |
|                             |  |  |
|                             |  |  |
|                             |  |  |
|                             |  |  |
|                             |  |  |
|                             |  |  |
| (Us                         | e attachment if necessary)                       |  |
| ADDICTED                    | TO A LA COM MAN                                  | (OPTIONAL)   |
| AKTICLE V<br>If an effectiv | : Effective date, if other than the date must be | late of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 days after           |
| the date of fi              | ing.)  |  |
|                             |  | ot meet the applicable statutory filing requirements, this date will not be listed as                              |
| the documen                 | t's effective date on the Departme               | ent of State's records.  |
| ARTICLE V                   | I: Other provisions, if any                      |  |
|                             |  |  |
|                             |  |  |
|                             | <del></del>                                      |  |
| RE                          | <u>OUIRED</u> SIGNATURE:                         |  |
|                             |  |  |
|                             | Signature of a                                   | member or an authorized representative of a member.  |
|                             | This document is exe                             | ecuted in accordance with section 605.0203 (1) (b), Florida Statutes.  |
|                             |  | alse information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S. |
|                             |  |  |
|                             | Lee Schauer                                      | Typed or printed name of signee  |
|                             |  | Typed of primed 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)

#### STATE OF FLORIDA

#### REGISTERED AGENT CONSENT FORM

DATE: 8/14/2024

ENTITY NAME: BK KB Music LLC

#### REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statues.

Leticia Herrera, Assistant Secretary

Paracorp Incorporated