

LD4000025517

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Name
Availability

Document
Number

DCC

Updater

Office Use Only

Updater
Verifier

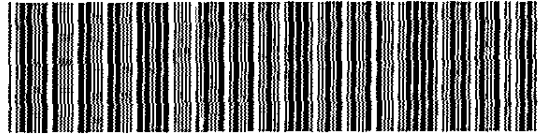
DCC

Acknowledgement

DCC

W. P. Verifier

DCC



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03/26/04--01041--024 **130.00

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2004 MAR 26 P 3:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

March 23, 2004

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

Dear Sir:

I am forwarding to you the completed Articles of Organization and Transmittal Letter for my newly developed business.

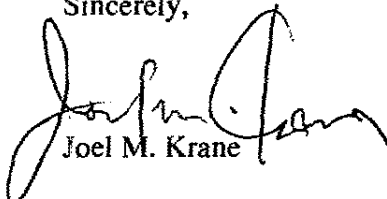
The following information is submitted per your request:

Joel M. Krane
2431 Indian Trail East
Palm Harbor, FL 34683
Daytime Phone: (727) 785-7851
Cell Phone: (727) 492-7851

Enclosed is my check in the amount of \$130.00 that includes \$100.00 for Filing Fee for Articles of Organization, \$25.00 for Designation of Registered Agent, and \$5.00 for Certificate of Status.

Thank you for your attention to this matter.

Sincerely,


Joel M. Krane

3 Enclosures: Articles of Organization
Transmittal Letter
Check for \$130.00

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TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Krane ART, 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:

Joel M. Krane
(Name of Person)

(Firm/Company)

2431 Indian Trail East
(Address)

Palm Harbor, FL 34683
(City/State and Zip Code)

For further information concerning this matter, please call:

Joel M. Krane at (727) 785-7851
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Krane Art, LLC

ARTICLE II - Address:

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

Principal Office Address:

2431 Indian Trail East
Palm Harbor, FL 34683

Mailing Address:

2431 Indian Trail East
Palm Harbor, FL 34683

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Joel M. Krane
Name

2431 Indian Trail East
Florida street address (P.O. Box NOT acceptable)

Palm Harbor FL 34683
City, State, and 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 608, F.S.

Joel M. Krane
Registered Agent's Signature

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TALLAHASSEE, FLORIDA

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Joel M. Krane
2431 Indian Trail East
Palm Harbor, FL 34683

MGRM

Suzanne L. Krane
2431 Indian Trail East
Palm Harbor, FL 34683

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Joel M. Krane

Typed or printed name of signee

Filing Fees:

- \$100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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