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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		FILED
SUBJECT: 315 Enterprises, LLC		2005 MAR 22 P 3: 42
(Name of Limite	d Liability Company)	SECRETARY OF STATE TALLAHASSES, FLORIDA
The enclosed Articles of Organization and fee(s) are s	ubmitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Carmen Lubbecke, Esq.	Name of Person)	
· ·		
Carmen Lubbecke, P.A.		
	(Firm/Company)	
4411 Bee Ridge Rd. #223		
	(Address)	···
Sarasota, FL 34233	(0. 17. 0.1)	
(City	/State and Zip Code)	
For further information concerning this matter, please	call:	
Carmen Lubbecke	at (941) 685-8692	
(Name of Person)	(Area Code & Daytime Te	elephone Number)
Enclosed is a check for the following amount:		
7 \$125.00 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)
STREET ADDRESS:	MAILING A	
Registration Section Division of Corporations	Registration S Division of Co	
409 E. Gaines Street Tallahassee, Florida 32399	P.O. Box 6327 Tallahassee, F	7

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

315 Enterprises, LLC

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TALLAMASSEE, FLORIDA

ARTICLE II – Address:

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

Principal Office Address:

Mailing Address:

315 Nokomis Ave. Venice, FL 34285

315 Nokomis Ave. Venice, FL 34285

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

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

Carmen Lubbecke, Esq. 4411 Bee Ridge Rd. #223 Sarasota, FL 34233

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 obligations of my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature

(CONTINUED)
Page 1 of 2

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

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

Title:

Name and Address:

FILED

Managing Member

Robert D. Kramer 315 Nokomis Ave. Venice, FL 34285

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SECRETARY OF STATE TALLAMASSEE, FLONIDA

ARTICLE V – Effective Date:

The effective Date of the Limited Liability Company shall be:

March 18, 2005

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.)

Printed Name of Signee: Robert D. Kramer