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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	<u></u>

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DIVISION OF CORPORATIONS
OF OF T - 2 PM 3: 52

J-BRYAN OCT - 3 2006

COVER LETTER

TO:	Registration Se Division of Co					
SUBJ	ECT: McCan	e Properties & Investi	ments LLC			
		(Name of Limited	d Liability Company)		-	-
		f Organization and fee(s) are so	_			
Please	e return all_corresp	ondence concerning this matte	r to the following:			
	Kerry DeLa	y McCane				
	**************************************	(0	Name of Person)			
	McCane Pr	operties & Investme	nts LLC		0	2
		(Firm/Company)		900	荒
	4489 Cinn	amon Dr			06 OCT - 2	유규
			(Address)		~~ ~	CORP
	Sarasota,	FL 34238			PH 3: 52	CORPORATIONS
			State and Zip Code)	·	<u> </u>	TIÓN:
For fi	irther information	concerning this matter, please	call:			
Nea	l McCane		at (816) 729-818	8		
	(Name	of Person)	(Area Code & Daytime T	elephone Number)	-	
Enclo	osed is a check fo	or the following amount:				
_	25.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	✓ \$160.00 Filing Certificate of Stat Certified Copy (additional copy is en	tus &	_
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns Circle	-	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	0 40
The name of the Limited Liability Company is:	6 C 15 C 2
	d Company" or their abbreviation "LLC," or "L.C.,")
McCane Properties & Investments LLC	
Must end with the words "Limited Liability Company, "Limite	d Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	d Company" or their abbreviation "LLC," or "L.C.,")
	incipal office of the Limited Liability Company is:
The maning address and savet address of the par	merpus office of the Emitted Elability Company is.
Principal Office Address:	Mailing Address:
McCane Properties & Investments LLC	McCane Properties & Investments LLC
4489 Cinnamon Dr	4489 Cinnamon Dr
Sarasota, FL 34238	Sarasota, FL 34238
business entity with an active Florida registration.) The name and the Florida street address of the re Kerry DeLay McCane	egistered agent are:
Name	
4489 Cinnamon Dr	- ·
	ress (P.O. Box NOT acceptable)
Sarasota	FL 34238
City, State, a	nd Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	accept service of process for the above stated limited his certificate, I hereby accept the appointment as I further agree to comply with the provisions of all rformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

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

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

MGRM	Kerry DeLay McCane
	4489 Cinnamon Dr
	Sarasota, FL 34238
MGRM	Neal C. McCane
	1212 SW Creekside Dr
	Lee's Summit, MO 64081
(Use attachment if necessary)

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.)

Neal C. McCane

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)
- \$ 5.00 Certificate of Status (Optional)