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To:

Division of Corporations

Fax Number

: (850)205-0383

Account Name : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335 : (305)599-0839 Phone Fax Number

: (305)716-0346

FLORIDA/FOREIGN LIMITED LIABILITY CO.

SHARON ALPHA, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
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Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Pursuant to \$.608.407, Florida Statutes)

ARTICLE I-NAME

The name of the Limited Liability Company is:

Sharon Alpha, LLC

ARTICLE II - ADDRESS

The mailing address of the principal office is:

31 West Tarpon Avenue Tarpon Springs, FL 34689

ARTICLE III - REGISTERED AGENT

The name and address of the registered agent are:

Todd G. Unbehagen 31 West Tarpon Avenue Tarpon Springs, FL 34689

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.

ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by the mambers and the names and addresses of

the managing members are: Todd G. Unbehagen 31 West Tarpon Avenue

Tarpon Springs, FL 34689

Sharon L. Unbehagen 31 West Tarron Avenue Tarpon Springs, FL 34689

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 within are true.

Signature of Member/Manager