W70000 49384

(Requestor's Nan	ne)
(Address)	
(Address)	
(City/State/Zip/Ph	one #)
PICK-UP WAIT	MAIL MAIL
(Business Entity I	Name)
(Document Numb	er)
Certified Copies Certification	ites of Status
Special Instructions to Filing Officer:	
	1.
	. \/
	NR
Office Use	Only

800104804428

07/02/07--01037--017 **160.00

COVER LETTER

TO: Registration S Division of C				
_{SUBJECT:} Ethan	ol Cowboy LLC			
•	(Name of Limite	d Liability Company)		
The enclosed Articles	of Organization and fee(s) are s	ubmitted for filing.		
Please return all corres	pondence concerning this matte	er to the following:		
Frank Le	e Stanonis			
	(Name of Person)		
self				
		(Firm/Company)		
P O Box	21725		01	
		(Address)	SECTALL	_
St. Peter	sburg, Florida 33	3742	是是 ~	•
	(City	/State and Zip Code)	SHO I	<u>-</u>
For further information	concerning this matter, please	call:	OT JUL -2 MILE SECRETARY OF STATE FLORIDA	11:55
Frank Lee Sta	nonis	at (727) 374.149	94	
(Nam	e of Person)	(Area Code & Daytime T	elephone Number)	
Enclosed is a check f	or the following amount:			
☐ \$125.00 Filing Fee	\$130.00 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)	
÷	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	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Ethanol Cowboy LLC	
(Must end with the words "Limited Liability Company, "Limite	d Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	
- · · · · · · · · · · · · · · · · · · ·	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2534 Eagles Crossing Drive	P. O. Box 21725
Clearwater, Florida 33762	St. Petersburg, Florida 33742
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registration.	ered Agent. You must designate an individual or another hands
Frank Lee Stanonis	
Name	ST. ST.
2534 Eagles Crossing D	rive SA S
	ress (P.O. Box NOT acceptable)
Clearwater, Florida 33762	FI.
City, State, a	
liability company at the place designated in the registered agent and agree to act in this capacity	accept service of process for the above stated limited his certificate, I hereby accept the appointment as v. I further agree to comply with the provisions of all rformance of my duties, and I am familiar with and

Registered Agent's Signature (REQUIRED)

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

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Me

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	Frank Lee Stanonis 2534 Eagles Crossing Drive Clearwater, Florida 33762	
		07 JUL F
		T JUL -2 AM II: 55
(Use attachment if necessary)		>
ARTICLE V: Effective date, if other that (If an effective date is listed, the date m to or 90 days after the date of filing.)	an the date of filing: (Const be specific and cannot be more than five bus	OPTIONAL) siness days prior
REQUIRED SIGNATURE:	- 0	

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.)

FRANK LEE STANONIS
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)